

Fiscal Year 2022 Budget Request Department Request

Randall W. Williams, MD, FACOG Director

DEPARTMENT OF HEALTH AND SENIOR SERVICES FISCAL YEAR 2022 BUDGET TABLE OF CONTENTS

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MISSOURI

Department of Health and Senior Services

2020 July - Final



ASPIRATION	We wil	We will protect health and keep people of Missouri safe											
THEMES	Reduce opioid misuse	Improve the health and safety of Missourians most in need	Enhance access to care	Foster a sustainable, high-performing department									
INITIATIVES	100 percent of 2018 maternal deaths will be reviewed by the PAMR board by January 2021. Create and disseminate an infographic regarding perinatal OUD to providers in Missouri by end of January 2021.	 Finalize contracts with LPHA's who have agreed to join the Safe Cribs for Missouri program by January 2021. Goal: Increase participation from 65 counties to 80 counties. Full implementation of EpiTrax including ingestion of electronic laboratory data for 80 percent of COVID-19 lab results by September 1, 2020. Expansion of daily COVID-19 laboratory testing capacity across the state through awarding up to 20 grant opportunities. The goal is 20,000 total additional daily tests across awardees. 	COVID-19 State Hospital Improvement Program – Goal: 46 out of 49 Rural Hospitals participate by end of 2020. Conduct surveys in the small rural hospitals and clinics to understand the barriers associated with detection and responses to infectious diseases by December 2020. Tel-Link – Set up an electronic format for citizens to communicate through text messaging rather than just voice calls by December 2020. Contract with LPHAs to conduct offsite influenza vaccination clinics targeting the at-risk adult population. Goal: Execute a contract with all 114 LPHAs by September 1 2020. Provide 95 portable coolers to ensure cold chain is maintained during transfer of vaccine to LPHAs by September 1, 2020.	The DHSS Lean Six Sigma Team will complete the Departmental Financial Project by December 31, 2020. The COVID-19 Hotline will continue to achieve a 5 percent or less abandonment rate through December, 2020.									

Auditor's Reports

Program or Division Name	Type of	Date	Website
	Report	Issued	
State of Missouri / Single Audit / Year	State Auditor's	March,	https://app.auditor.mo.gov/Repository/Press/2020014816779.pdf
ended June 30, 2019	Report	2020	
State of Missouri / Single Audit / Year	State Auditor's	March,	https://app.auditor.mo.gov/Repository/Press/2019021102830.pdf
ended June 30, 2018	Report	2019	
State of Missouri / Single Audit / Year	State Auditor's	March,	https://app.auditor.mo.gov/Repository/Press/2018016389739.pdf
ended June 30, 2017	Report	2018	
MO Dept. of Health and Senior Services /	State Auditor's	June, 2017	https://app.auditor.mo.gov/AuditReports/CitzSummary.aspx?id=578
Div. of Community and Public Health	Report		
Bureau of Vital Records (BVR)			
MO Dept. of Health and Senior Services /	State Auditor's	December,	https://app.auditor.mo.gov/AuditReports/CitzSummary.aspx?id=698
Div. of Senior and Disability Services	Report	2018	
Home and Community Based Services			
(HCBS)			
MO Dept. of Health and Senior Services /	OIG Federal	March,	https://oig.hhs.gov/oas/reports/region7/71803230.asp
Div. of Regulation and Licensure Section	Audit	2020	
for Long Term Care Regulation (SLCR)			
MO Dept. of Health and Senior Services /	Federal	October,	No website available. Hard copy available upon request.
Div. of Community and Public Health	Management	2019	
Child and Adult Community Food Program	Evaluation		
(CACFP)	USDA Food &		
	Nutrition		
	Services		
MO Dept. of Health and Senior Services /	CDC Federal	September,	No website available. Hard copy available upon request.
Div. of Community and Public Health	Site Visit	2019	
Bureau of HIV, STD, Hepatitis (BHSH)			
MO Dept. of Health and Senior Services /	CDC Federal	October,	No website available. Hard copy available upon request.
Div. of Community and Public Health	Site Visit	2019	
Section for Disease Prevention (DP)			
Bureau of Immunization (BI)	0005 1 1		
MO Dept. of Health and Senior Services /	CDC Federal	January,	No website available. Hard copy available upon request.
Div. of Community and Public Health	Site Visit	2020	
Public Health Emergency			
Preparedness/Hospital Preparedness			
Program (PHEP/HPP)	HUD Federal	Morob	No website available. Hard convieweilable upon request
MO Dept. of Health and Senior Services /	Site Visit	March, 2018	No website available. Hard copy available upon request.
Div. of Community and Public Health	Site VISIL	2010	
Bureau of HIV, STD, Hepatitis (BHSH) MO Dept. of Health and Senior Services /	CDC Federal	Contombor	No website available. Hard copy available upon request.
Div. of Community and Public Health Well-	Site Visit	September, 2017	ino website available. Hard copy available upon request.
Integrated Screening & Evaluation for	OILE VISIL	2017	
Women Across the Nation (WISE			
WOMAN)			
VVOIVIAIN)			

MO Dept. of Health and Senior Services / Div. of Community and Public Health WIC Program	USDA Federal Financial Management Review	August, 2017	No website available. Hard copy available upon request.
MO Dept. of Health and Senior Services / Div. of Community and Public Health WIC Program	USDA Federal Management Review	April, 2018	No website available. Hard copy available upon request.
MO Dept. of Health and Senior Services / Div of DCPH Environmental & Public Health (EPH)	CDC Federal Site Visit	June, 2018	No website available. Hard copy available upon request.
MO Dept. of Health and Senior Services / Div. of Community and Public Health Enhanced State Opioid Overdose Surveillance / Bureau of Health Care Analysis & Data Dissemination (ESOOS/BHCADD)	CDC Federal Site Visit	April, 2018	No website available. Hard copy available upon request.
MO Dept. of Health and Senior Services / Div. of Community and Public Health Tobacco Control (CTCP)	CDC Federal Site Visit	October, 2018	No website available. Hard copy available upon request.
MO Dept. of Health and Senior Services / Div. of Community and Public Health HPP/PHEP/Zika Emergency	CDC Federal Site Visit	February, 2018	No website available. Hard copy available upon request.

Program	Statutes Establishing	Sunset Date	Review Status
Non-Medicaid Eligible Services	Section 208.930, RSMo	June 30, 2025	Has not been started.
Radioactive Waste Shipments	Section 260.392, RSMo	August 28, 2024	Has not been started.

Director's Office

CORE DECISION ITEM									
Health and Senior Services	Budget Unit 58015C								
Director's Office									
Core - Director's Office	HB Section 10.600								

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 2022 Governor's Recommendation			ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	150,732	384,056	0	534,788	PS	0	0	0	0
EE	16,705	65,910	0	82,615	EE	0	0	0	0
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	167,437	449,966	0	617,403	Total	0	0	0	0
FTE	3.00	6.00	0.00	9.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	92,066	211,487	0	303,554	Est. Fringe	0	0	0	0
Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted					Note: Fringes be	udgeted in Hous	e Bill 5 except	for certain fring	es budgeted
directly to MoDOT, Highway Patrol, and Conservation.					directly to MoDC	directly to MoDOT, Highway Patrol, and Conservation.			

2. CORE DESCRIPTION

The Office of the Director, which includes the Board of Health and Senior Services, serves as the focal point for leadership and coordination across the department. The director articulates and reinforces the department's vision and goals to the programs within the department and provides advice and counsel on public health and senior services issues to the governor and the legislature. The director of the Department of Health and Senior Services facilitates the department's partnership with local public health agencies, Area Agencies on Aging, and other organizations addressing public health and senior issues.

The Director's Office staff provide administrative leadership, support, coordination, and oversight for the entire department. Staff within the Director's Office coordinate press releases and respond to media requests on health information and the department's social media posts, work on organizational development issues, provide counsel on regulatory and licensure actions, pursue guardianships for eligible adults, and provide legal assistance to all departmental divisions. This also includes the Employee Disqualification List (EDL) program that manages all aspects of the statutorily mandated EDL process, including complaint investigations indicating possible abuse, neglect, misappropriation of funds or property, and falsification of service delivery documents by employees.

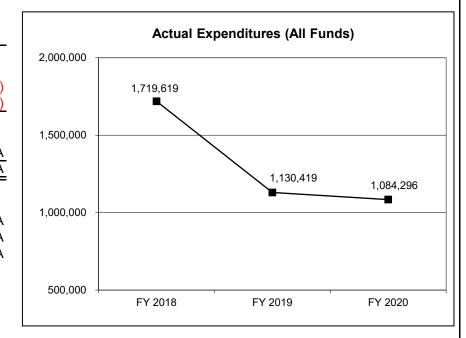
3. PROGRAM LISTING (list programs included in this core funding)

DHSS Director's Office

Health and Senior Services Director's Office Core - Director's Office

4. FINANCIAL HISTORY

	FY 2018	FY 2019	FY 2020	FY 2021
_	Actual	Actual	Actual	Current Yr.
Appropriation (All Funds)	1,825,601	1,156,143	1,181,513	617,403
Less Reverted (All Funds)	(14,063)	(7,313)	(7,531)	(4,957)
Less Restricted (All Funds)*	0	0	0	(2,202)
Budget Authority (All Funds)	1,811,538	1,148,830	1,173,982	610,244
Actual Expenditures (All Funds)	1,719,619	1,130,419	1,084,296	N/A
Unexpended (All Funds)	91,919	18,411	89,686	N/A
_				
Unexpended, by Fund:				
General Revenue	0	0	4,609	N/A
Federal	91,919	18,411	85,076	N/A
Other	0	. 0	0	N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

^{*}Current Year restricted amount is as of 07/01/2020.

CORE RECONCILIATION DETAIL

OFFICE OF THE DIRECTOR

5. CORE RECONCILIATION DETAIL

33	00.0	907,81	016'99	0	919,58	9
Sd	00.6	150,732	38 1 ,056	0	387,46 2	8
СОВЕ						
Total	00.6	754,731	996'6††	0	C04,718	= 3
33	00.0	907,81	016'99	0	319,28	9
Sd	00.6	150,732	384,056	0	387,46 2	8
Total	00.6	754,731	996'6††	0	C04,718	= 3
33	00.0	907,81	016,39	0	319,28	9
Sd	00.6	150,732	384,056	0	387,46 2	8
Budget Class	3T4	ЯЭ	Federal	Other	Total	Explanation
,	Class Total PS EE Total CORE	Class FTE PS 9.00 PS 9.00 Total 9.00 FE 0.00 Total 9.00 PS 9.00 Total 9.00 PS 9.00	Class FTE GR PS 9.00 150,732 PS 9.00 16,705 PS 9.00 16,705	Class FTE GR Federal PS 9.00 150,732 384,056 PS 9.00 16,705 65,910 PS 9.00 160,732 384,056 PS 9.00 16,705 65,910 PS 9.00 16,705 65,910 PS 9.00 16,705 65,910 PS 9.00 160,732 384,056 PS 9.00 160,732 384,056 PS 9.00 160,732 384,056	Class FTE GR Federal Other PS 9.00 160,732 384,056 0 PS 9.00 167,437 449,966 0 PS 9.00 160,732 384,056 0 PS 9.00 167,437 449,966 0 PS 9.00 160,732 384,056 0 PS 9.00 160,732 384,056 0 PS 9.00 160,732 384,056 0	Class FTE GR Federal Other Total PS 9.00 16,705 65,910 0 634,78 PS 9.00 16,705 65,910 0 634,78 PS 9.00 16,705 65,910 0 634,78 PS 9.00 16,705 65,910 0 82,61 PS 9.00 16,705 65,910 0 82,61 PS 9.00 16,705 65,910 0 82,61 PS 9.00 167,437 449,966 0 617,40 PS 9.00 167,437 449,966 0 617,40 PS 9.00 167,437 449,966 0 617,40 PS 9.00 167,437 449,966 0 634,78

996'677

£04,718

754,731

9.00

Total

DECISION ITEM SUMMARY

EX 2022

00.0	0\$		00.6	£04,718	00.6	£0 1 ,718\$	44.71	66£' 1 80'l\$	ТАТОТ ПИАЯ Э
00.0	0		00.6	£04,718	00.6	£0 1 ,718	44.71	66£,480,1	JATOT
00.0	0		00.0	82,615	00.0	219,28 	00.0	870,87	33 - JATOT
00.0	0 0		00.0	016,28 019,28	00.0	016,20 019,20	00.0	887,11 092,18	EXPENSE & EQUIPMENT GENERAL REVENUE DHSS-FEDERAL AND OTHER FUNDS
00.0 00.0 00.0	0 0 0		00.8 00.8 00.9	150,732 380,486 887,463	00.8 00.9 00.9	287,031 <u>880,488</u> 887,483	73.£ 77.£1 44.71	\$60,722 822,487 128,110,1	OFFICE OF THE DIRECTOR CORE PERSONAL SERVICES GENERAL REVENUE DHSS-FEDERAL AND OTHER FUNDS TATOL PS
:ОГПШИ ЕСПИЕD		COLUM	DEPT REQ ETE	DEPT REQ DOLLAR	BUDGET FTE	BUDGET POLLAR	ACTUAL ETE	ACTUAL POLLAR	Budget Object Summary Fund

FY 2021

EX 2020

EX 2020

FY 2021

EX 2022

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Decision Item

Budget Unit

DECISION ITEM DETAIL

SECURED

SECNKED

DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

Budget Object Class	ВОГГАК	3T4	ВОГГАВ	3T7	ВОГГАВ	3T7	СОГЛШИ	СОГЛШИ
FICE OF THE DIRECTOR								
ВЕ								
ADMIN OFFICE SUPPORT ASSISTANT	376,75	40.1	148,88	2.00	0	00.0	0	00.0
SR OFFICE SUPPORT ASSISTANT	890,01	9£.0	0	00.0	0	00.0	0	00.0
LERSONNEL OFFICER	387,04	98.0	0	00.0	0	00.0	0	00.0
HUMAN RELATIONS OFCR III	220,8	11.0	0	00.0	0	00.0	0	00.0
PERSONNEL ANAL II	62,453	09.1	0	00.0	0	00.0	0	00.0
PERSONNEL ANAL II	Z60'Z6	2.29	0	00.0	0	00.0	0	00.0
STAFF TRAINING & DEV COOR	994,42	00.1	0	00.0	0	00.0	0	00.0
HEALTH PROGRAM REP II	797	10.0	0	00.0	0	00.0	0	00.0
HEALTH PROGRAM REP III	4,514	01.0	0	00.0	0	00.0	0	00.0
HIMVA BESOLIBCES WOB BY beksonner Crekk	9EV ZZ 619'99	2.00	0	00.0	0	00.0	0	00.0
HUMAN RESOURCES MGR B1	984,77 366 341	26 [.] 0	0	00.0	0	00.0	0	00.0
STATE DEPARTMENT DIRECTOR	745,392	00.1	508,741	00.1	527,741 100 50	00.1	0	00.0
DESIGNATED PRINCIPAL ASST DEPT	£05,88	00.1	768, <u>2</u> 8	00.1	100,76	00.1	0	00.0
DESIGNATED PRINCIPAL ASST DIV	001,18	00.1	0	00.0	0	00.0	0	00.0
PROJECT SPECIALIST	907,1 300,1	2 0.0	0	00.0	0	00.0	0	00.0
SPECIAL ASST PROFESSIONAL	904,4	90.0	980 62	00.0	0	00.0	0	00.0
SPECIAL ASST OFFICE & CLERICAL	119,27 272,681	26.0 3.08	380,87 288,371	00.↑ 00.₄	158,040 158,040	00.↑ 00.4	0	00.0
LEAD ADMIN SUPPORT ASSISTANT	0	00.0	0	00.0	629,64	2.00	0	00.0
Sq - JATOT		- 20.0		00.6	<u>884,788</u>	00.6	- 0	00.0
TRAVEL, IN-STATE	1 5,110,1 15,110,1	00.0	887,453 583,7	00.0	188,7	00.0	0	00.0
TRAVEL, OUT-OF-STATE		00.0		00.0	3,472	00.0	0	00.0
SUPPLIES	112,78 112,78	00.0	3,005 300,24	00.0	096'0†	00.0	0	00.0
PROFESSIONAL DEVELOPMENT	12,904	00.0	13,133	00.0	14,450	00.0	0	00.0
COMMUNICATION SERV & SUPP	0۲۱,9	00.0	7,474	00.0	Z99'E	00.0	0	00.0
PROFESSIONAL SERVICES	61 7 ,8	00.0	908,7	00.0	904'9	00.0	0	00.0
M&R SERVICES	247,1	00.0	136	00.0	192'1	00.0	0	00.0
OFFICE EQUIPMENT	0	00.0	3,100	00.0	271,1	00.0	0	00.0
ОТНЕК ЕQUIРМЕИТ	0	00.0	001	00.0	001	00.0	0	00.0
BUILDING LEASE PAYMENTS	120	00.0	416	00.0	کا 6	00.0	0	00.0
EQUIPMENT RENTALS & LEASES	0	00.0	1,350	00.0	375	00.00	0	00.00

BUDGET

FY 2021

AUTDA

LA 5050

AUTOA

LA 5050

Decision Item

Budget Unit

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DECISION ITEM DETAIL

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00.0 00.0		3.00 6.00	996'6 77 \$ ८६ 7 '८९८\$	3.00 00.8	996'6 77 \$ ८६ 7 '८9 । \$	79.E 77.E1	\$538,881 \$538,881	GENERAL REVENUE FEDERAL FUNDS
00.0	0\$	00.6	E04,718\$	00.6	E04,718	44.71 	666,480,1\$	JATOT GNANO
00.0	0	00.0	82,615	00.0	82,615	00.0	870,87	TOTAL - EE
00.0	0	00.0	G78,1	00.0	881⁄	00.0	604,1	WISCELLANEOUS EXPENSES
								COKE
								OFFICE OF THE DIRECTOR
СОГЛШИ	СОГЛШИ	ЭТЭ	DOLLAR	3T7	DOLLAR	ЭТЭ	ВОГГАВ	Budget Object Class
SECNBED	SECURED	DEPT REQ	DEPT REQ	BUDGET	BUDGET	AUTOA	AUTOA	Decision Item
*******	******	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit

00.0

0\$

OTHER FUNDS

0\$

9\21\20 10:39 im_didefail

Department of Health and Senior Services DHSS Director's Office						HB Section(s): 10.600					
									•		
Program is found	in the following core bud	get(s):			•						
	Director's Office								TOTAL		
GR	167,437								167,437		
FEDERAL	449,966								449,966		
OTHER	0								0		
TOTAL	617,403							_	617,403		

1a. What strategic priority does this program address?

Foster a sustainable, high-performing department.

1b. What does this program do?

The Office of the Director, which includes the Board of Health and Senior Services, serves as the focal point for leadership and coordination across the department. The director articulates and reinforces the department's vision and goals to the programs within the department and provides advice and counsel on public health and senior services issues to the governor and the legislature. The Director's Office also performs duties such as:

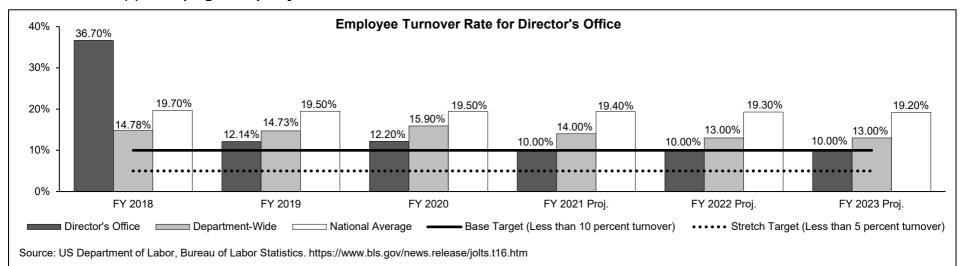
- assuring compliance with personnel law;
- coordinating press releases and responding to media requests on health information and the department's social media posts;
- · working on strategic planning, accreditation, and organizational development issues;
- providing counsel on regulatory and licensure actions, pursuing guardianships for eligible adults, and providing legal assistance to all departmental divisions; and
- overseeing the Employee Disqualification List (EDL) program that manages all aspects of the statutorily mandated EDL process including complaint
 investigations indicating possible abuse, neglect, misappropriation of funds or property, or falsification of service delivery documents by employees.

2a. Provide an activity measure(s) for the program.

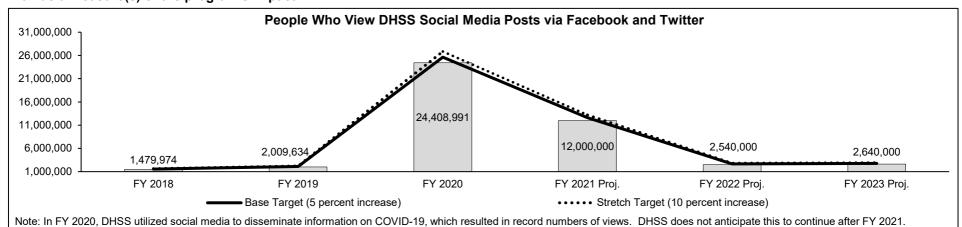
Services Provided by the Director's Office in Support of Programmatic Functions							
News Releases	91	Sunshine Requests	717				
Twitter Posts	1,004	Guardianships Assigned	64				
Facebook Posts	757	EDL Checks	437,032				

Department of Health and Senior Services	HB Section(s): 10.600
DHSS Director's Office	
Program is found in the following core budget(s):	-

2b. Provide a measure(s) of the program's quality.

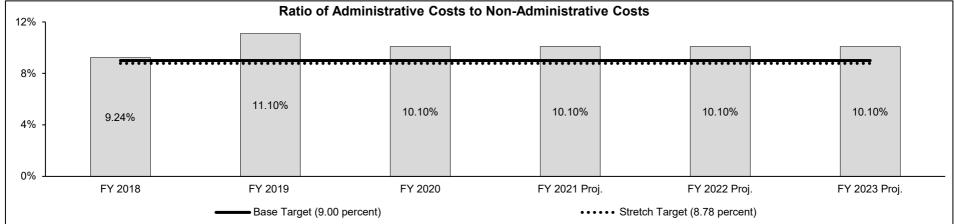


2c. Provide a measure(s) of the program's impact.

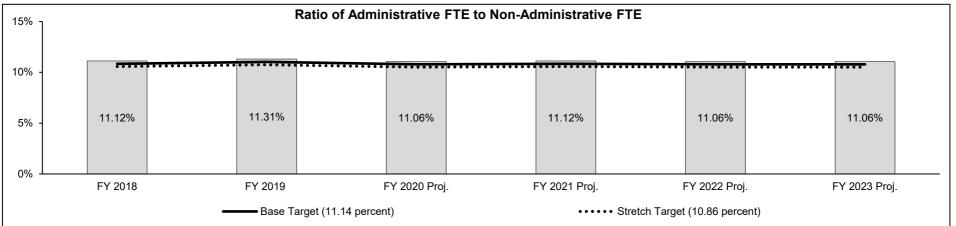


Department of Health and Senior Services	HB Section(s): 10.600
DHSS Director's Office	
Due amount to formed to the fellowing a case burduet/o).	

Program is found in the following core budget(s): 2d. Provide a measure(s) of the program's efficiency.



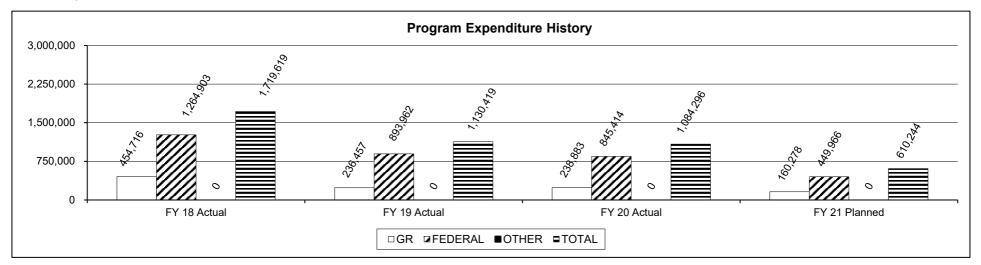
Note: Administrative Costs include Personal Services (PS) and Expense & Equipment (EE) from Director's Office, Division of Administration, and the administrative staff of the programmatic divisions. Data also does not include costs in support of programmatic activities.



Note: Administrative FTE include staff from Director's Office, Division of Administration, and the administrative staff of the programmatic divisions. Data also does not include FTE performing programmatic activities.

Department of Health and Senior Services	HB Section(s): 10.600
DHSS Director's Office	· · · · · · · · · · · · · · · · · · ·
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Not applicable.

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Section 191.400, RSMo (State Board of Health and Senior Services); Chapter 192, RSMo (department); and Sections 197.500, 198.070, 198.090, 208.912, and 208.915, RSMo (Employee Disqualification List).

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

The EDL program fulfills the requirements of 42.CFR 483.13, 42 CFR 483.156, and 42 CFR 488.335 requiring a state procedure for reporting findings to licensing boards and adding indicators to the Nurse Aid Registry for certified nurses aids who have abused or neglected residents or misappropriated funds or property.

Division of Administration

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58025C
Administration		
Core - Administration	HB Section	10.605

1. CORE FINANCIAL SUMMARY

FY 2022 Budget Request						FY 202	22 Governor's	Recommendat	ecommendation		
	GR	Federal	Other	Total		GR	Fed	Other	Total		
PS	313,639	3,109,463	141,119	3,564,221	PS	0	0	0	0		
EE	58,659	1,619,053	769,096	2,446,808	EE	0	0	0	0		
PSD	0	35,510	0	35,510	PSD	0	0		0		
TRF	0	0	0	0	TRF	0	0	0	0		
Total	372,298	4,764,026	910,215	6,046,539	Total	0	0	0	0		
FTE	12.81	62.77	1.77	77.35	FTE	0.00	0.00	0.00	0.00		
Est. Fringe	283,832	1,911,647	71,604	2,267,083	Est. Fringe	0	0	0	0		
Note: Fringes	budgeted in House	Bill 5 except for	r certain fringes	s budgeted	Note: Fringes b	oudgeted in Hou	se Bill 5 except	for certain fring	es budgeted		
directly to MoD	OT Highway Patro	ol and Conserva	ation		directly to MoDO	OT Highway Pa	trol and Conse	rvation			

Other Funds: Nursing Facility Quality of Care (0271), Health Access Incentive (0276), Mammography (0293), Missouri Public Health Services (0298), Professional and Practical Nursing Student Loan and Nurse Loan Repayment (0565), Veterans Health and Care Fund (0606), Department of Health and Senior Services Document Services (0646), Putative Father Registry (0780), Organ Donor Program (0824), and Childhood Lead Testing (0899).

2. CORE DESCRIPTION

The Division of Administration provides administrative and financial support services for the Department of Health and Senior Services. The division assists the efforts of the programmatic divisions to provide services to Missourians in a cost-effective manner that assures fiscal accountability for taxpayer dollars. The Division of Administration processes all grant applications, initiates federal draws related to grants, and prepares required federal and state financial reports. In addition, the division reviews and processes all contracts and procurements to ensure that services and commodities are economically obtained; processes all payments to vendors; assesses program performance and compliance with state and federal requirements; maintains an inventory of physical assets to ensure the fiscal integrity of state property; operates warehouse, delivery, and mailroom services for the department: and works with the Office of Administration to manage building leases and related issues that arise with a workforce that operates from state office buildings and leased facilities spread across the state. Within the division is the Office of Human Resources, which ensures compliance with state personnel law, personnel functions/employee relations, professional development, and recruitment. Department-wide operating expenditures such as telecommunications, postage, vehicle fleet operations, copy machine repair, paper, envelopes, building security, and freight services are paid from the division's budget. The division also prepares the departmental budget submission and responds to budget-related inquiries and fiscal note requests from the Office of Administration and the legislature.

CORE DECISION ITEM

Health and Senior Services	Budget Unit 58025C	
Administration		
Core - Administration	HB Section 10.605	

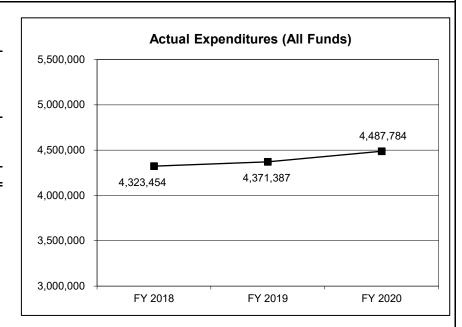
3. PROGRAM LISTING (list programs included in this core funding)

Administration

4. FINANCIAL HISTORY

_	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	5,839,779	5,365,049	5,598,799	6,046,539
Less Reverted (All Funds)	(11,616)	(11,735)	(12,350)	(11,965)
Less Restricted (All Funds)*	0	0	0	(23,483)
Budget Authority (All Funds)	5,828,163	5,353,314	5,586,449	6,011,091
Actual Expenditures (All Funds)	4,323,454	4,371,387	4,487,784	N/A
Unexpended (All Funds)	1,504,709	981,927	1,098,665	N/A
Unexpended, by Fund: General Revenue Federal Other	169 1,066,655 437,886	7 600,261 381,660	79,248 759,272 260,145	N/A N/A N/A

^{*}Current Year restricted amount is as of 7/01/2020.



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: FY 2020 Appropriation amount includes \$202,140 for mileage reimbursement.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVINDIVISION OF ADMINISTRATION

	3,564,221	611,141	£94,601,E	913,639	35.77	ОВЕ	NDED C	OWWE	солевиов. В вес
	6,046,539	912,016	4,764,026	372,298	35.77	Total			
	32,510	0	36,510	0	00.0				
	2,446,808	960'694	£30,619,1	699'89	00.0	33			
	3,564,221	611'171	£94,601,E	913,639	35.77	Sd			
							TSEU	E BEG	DEPARTMENT COR
	0	0	0	0	00.0	SEDNAH	NENT C	ИТЯΑЧ	NET DE
planned expenditures.									
Internal reallocations based on	25,010	0	010,62	0	00.0	ЬD	9694	79l	Core Reallocation
planned expenditures.									
Internal reallocations based on	(25,010)	0	(25,010)	0	00.0	33	9694	791	Core Reallocation
planned expenditures.		_	_						
Internal reallocations based on	0	0	0	0	00.0	Sd	5697	791	Core Reallocation
Internal reallocations based on planned expenditures.	0	0	0	0	00.0	0.1	66.11	- 01	Core Reallocation
planned expenditures.	U	0	0	0	00 0	Sd	6671	191	Core Reallocation
Internal reallocations based on	0	0	0	0	00.0	Sd	9694	1 91.	Core Reallocation
	· ·	Ü	· ·	Ü	00 0				DEPARTMENT COR
	666,646,539	910,215	920,497,4	372,298	35.77	Total			
	10,500	0	10,500	0	00.0	ВD			
	818,174,2	960'694	1,644,063	699'89	00.0	33			
	3,564,221	611'171	£94,601,E	913,639	35.77	Sd			
								SE	TAFP AFTER VETOR
Explanation	lstoT	Other	Federal	ЯЭ	ЭТЭ	Budget Class			
						ור	AT30 I	10ITAI.	2. CORE RECONCIL

£30,618,1

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2,446,808

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CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVIN DIVISION OF ADMINISTRATION

	6,046,539	910,215	4,764,026	372,298	35.77	Total	
	35,510	0	32,510	0	00.0	ьD	
						ORE	GOVERNOR'S RECOMMENDED C
noiżsnaldx	Total E	Other	Federal	ВЭ	3T7	Class	-
						Budget	
-							9. CORE RECONCILIATION DETAI

DECISION ITEM SUMMARY

00.0		0	0.00	2,446,808	00.0	818,174,2	0.00	4,529,477,1	∃∃ - JATOT
00.0		0	00.0	000'9	00.0	000'9	00.0	0	CHILDHOOD LEAD TESTING
00.0		0	00.0	30,000	0.00	30,000	0.00	697,62	МАЯЭОЯЧ ЯОИОД ИАЭЯО
00.0		0	00.0	Z2'000	00.0	72,000	0.00	866,01	YATCIOER REGISTRY
00.0		0	00.0	30,000	00.0	30,000	00.0	0	DEPT OF HEALTH-DONATED
00.0		0	00.0	149' <i>t</i> t	00.0	1 2 9'77	00.0	424	DEPT HEALTH & SR SV DOCUMENT
00.0		0	00.0	30,000	00.0	30,000	0.00	0	PROF & PRACT NURSING LOANS
00.0		0	00.0	199,525	00.0	979,691	00.0	60£,691	MO PUBLIC HEALTH SERVICES
00.0		0	00.0	25,000	00.0	72,000	00.0	24,915	YHAAAGOMMAM
00.0		0	00.0	20,000	00.0	20,000	00.0	13,343	HEALTH ACCESS INCENTIVE
00.0		0	00.0	330,000	00.0	330,000	0.00	726,972	NURSING FAC QUALITY OF CARE
00.0		0	00.0	1,619,053	0.00	£90'ヤヤ9'レ	00.0	1,203,564	DHSS-FEDERAL AND OTHER FUNDS
00.0		0	00.0	699'89	0.00	699'89	00.0	45,940	GENERAL REVENUE
									EXPENSE & EQUIPMENT
00.0		0	77.35	152,466,521	35.77	3,564,221	90.09	266,186,2	29 - JATOT
00.0		0	77.1	611'171	97.1	611'171	3.03	135,216	MO PUBLIC HEALTH SERVICES
00.0		0	77.23	£94,601,£	87.28	£94,601,£	52.20	2,335,248	DHSS-FEDERAL AND OTHER FUNDS
00.0		0	12.81	989,818	12.81	959,515	4.82	211,528	GENERAL REVENUE
									PERSONAL SERVICES
									СОВЕ
									DIVISION OF ADMINISTRATION
NIV	СОГЛИ	СОГЛШИ	3T7	DOLLAR	ЭТЭ	ВОГГАВ	3T4	DOLLAR	Pun∃
ED	SECUR	SECNKED	DEPT REQ	рерт кед	BUDGET	BUDGET	AUTOA	AUTDA	Budget Object Summary
****	*****	******	FY 2022	FY 2022	FY 2021	FY 2021	EV 2020	FY 2020	Decision Item

669,046,539

66,046,539

10,500

10,500

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\$4,492,031

4,492,031

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36,510

665,046,539

66,046,539

95,510

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PROGRAM-SPECIFIC

DHSS-FEDERAL AND OTHER FUNDS

JATOT

Budget Unit

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DECISION ITEM DETAIL

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DEPT REQ

EX 2022

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BUDGET

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-								
00.0	0	00.0	0	١.00	129°1 7	66 [.] 0	₹ 96'0 †	EXECUTIVE II
00.0	0	00.0	0	2.00	ZÞ6'ÞZ	66.1	686,17	EXECUTIVE I
00.0	0	00.0	0	00.1	£69'9 †	00.0	0	TRAINING TECH II
00.0	0	00.0	0	1.00	£ 1 0,78	00.0	0	STAFF TRAINING & DEV COOR
00.0	0	00.0	0	2.88	127,067	51.0	1 89'9	PERSONNEL ANAL II
00.0	0	00.0	0	١.00	80Z,14	00.0	0	PERSONNEL ANAL I
00.0	0	00.0	0	١.00	9Z0'29	00.0	0	HUMAN RELATIONS OFCR III
00.0	0	00.0	0	00.0	1,528	00.0	0	PERSONNEL OFFICER
00.0	0	00.0	0	2.00	92 [°] 242	1.62	373,575	ACCOUNTING GENERALIST II
00.0	0	00.0	0	00.0	197	89.0	996'ZI	ACCOUNTING TECHNICIAN
00.0	0	00.0	0	9.00	013,651	4.52	153,865	ACCOUNTING CLERK
00.0	0	00.0	0	١.00	43,325	١٢.0	30,276	BUDGET ANAL II
00.0	0	00.0	0	١.00	721,04	30.1	∠ ∠6'0 /	BUDGET ANAL I
00.0	0	00.0	0	١.00	879,73	١.00	68,839	ACCOUNTING ANAL III
00.0	0	00.0	0	3.00	711,152	18.1	618,66	ACCOUNTING SPECIALIST III
00.0	0	00.0	0	3.00	609'6†l	3.55	129,732	ACCOUNTING SPECIALIST II
00.0	0	00.0	0	2.00	62'603	61.1	942,64	ACCOUNTING SPECIALIST I
00.0	0	00.0	0	١.00	946'09	1.03	621,129	ACCOUNTANT III
00.0	0	00.0	0	١.00	087,44	12.0	890'6	II TNATNUODDA
00.0	0	00.0	0	3.00	106,301	11.2	75,640	I TNATNUODDA
00.0	0	00.0	0	١.00	£67,£4	73.0	52,989	I AOTIQUA
00.0	0	00.0	0	0.00	869	75.0	£01,71	II AOTIQUA
00.0	0	00.0	0	0.00	914	92.0	606,6	ACCOUNT CLERK II
00.0	0	00.0	0	١.00	070,84	00.1	66£,7 <i>4</i>	PROCUREMENT OFCR II
00.0	0	00.0	0	4.00	09t'69l	17.8	195,159	PROCUREMENT OFCR I
00.0	0	00.0	0	١.00	37,020	66.0	386,385	SUPPLY MANAGER I
00.0	0	0.00	0	2.00	125,521	96.1	60,323	STOREKEEPER II
00.0	0	0.00	0	2.00	759,33	48.1	792,03	STOREKEEPER I
00.0	0	0.00	0	١.00	148,04	66.0	40,246	SUPPORT SERVICES TECHNICIAN
00.0	0	0.00	0	2.00	681,65	94.1	079,54	SR OFFICE SUPPORT ASSISTANT
00.0	0	0.00	0	2.00	48,500	96.1	984,84	OFFICE SUPPORT ASSISTANT
00.0	0	0.00	0	9.00	161,056	5.08	317,831	ADMIN OFFICE SUPPORT ASSISTANT
								COKE
								DIVISION OF ADMINISTRATION

DOLLAR

BUDGET

FY 2021

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ACTUAL

LA 5050

DOLLAR

ACTUAL

LA 5050

Budget Object Class

Decision Item

Budget Unit

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DECISION ITEM DETAIL

SECURED

DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

SECURED

СОГЛИИ	СОГЛШИ	ЭТЯ	ВОГГАВ	3T4	DOLLAR	ЭТЭ	DOLLAR	Budget Object Class
								NOITARTSINIMGA 70 NOISIVID
								СОВЕ
00.00	0	00.0	0	2.00	369,78	00.00	165	DEBRONNEL CLERK
00.0	0	00.0	0	00.1	307,88	66.0	38,142	II JANA ƏVITAЯTƏINIMDA
00.0	0	00.0	0	00.0	0	00.0	143	ADLT PROT & CMTY WKR II
00.0	0	00.0	0	00.1	36,503	66.0	32,042	MAINTENANCE WORKER II
00.0	0	00.0	0	00.1	£96'0 1 ⁄	1.00	446,36	MAINTENANCE SPV I
0.00	0	00.0	0	00.1	25,783	66.0	504,62	MOTOR VEHICLE DRIVER
00.0	0	00.0	0	2.00	141,630	66.1	139,550	FACILITIES OPERATIONS MGR B1
00.0	0	00.0	0	7.00	142,883	7 9 [.] 9	7 89'08 7	FISCAL & ADMINISTRATIVE MGR B1
00.0	0	00.0	0	00.1	998'08	00.0	0	HUMAN RESOURCES MGR B1
0.00	0	١.00	379,001	00.1	102,168	7 6.0	878,89	DIVISION DIRECTOR
0.00	0	١.00	608,16	00.1	40۲,16	66.0	098'06	DEPUTY DIVISION DIRECTOR
00.0	0	2.00	145,921	2.50	129,434	1 6.0	43,085	DESIGNATED PRINCIPAL ASST DIV
0.00	0	7 ⊅.1	955,73	13.1	200'09	27.0	27,246	PROJECT SPECIALIST
00.0	0	b.34	778,22	0.34	778,22	44.0	29,075	FE€∀F CO∩NSEF
00.0	0	90.0	888,8	90.0	988'9	11.0	12,569	CHIEŁ CONNZET
00.0	0	90.0	099'₺	90.0	099'₺	90.0	206,4	SENIOK COUNSEL
00.0	0	00.0	0	00.0	0	00.0	752	MISCELLANEOUS PROFESSIONAL
00.0	0	2.00	163,607	00.1	972'99	99.0	317,95	SPECIAL ASST PROFESSIONAL
00.0	0	00.0	0	00.0	91	00.0	0	SPECIAL ASST OFFICE & CLERICAL
00.0	0	2.00	Zħl'99	00.0	0	00.0	0	TNATSISSA TAO99US NIMQA
00.0	0	0 1 .8	677,87 <u>2</u>	00.0	0	00.0	0	LEAD ADMIN SUPPORT ASSISTANT
00.0	0	3.00	811,911	00.0	0	00.0	0	ADMIN SUPPORT PROFESSIONAL
00.0	0	2.00	120,986	00.0	0	00.0	0	ADANAM EVITARTIVE MANAGER
00.0	0	2.00	₹ 0∠'99	00.0	0	00.0	0	TNATSISSA 3SUOH3AAWS3AOTS
00.0	0	2.00	62,613	00.0	0	00.0	0	STORES/WAREHOUSE ASSOCIATE
00.0	0	١.00	360,75	00.0	0	00.0	0	STORES/WAREHOUSE SUPERVISOR
00.0	0	00.0	0	00.0	0	00.0	0	STAFF DEV TRAINING SPECIALIST
00.0	0	١.00	₽5°451	00.0	0	00.0	0	STAFF DEVELOPMENT TRAINING MGR
00.0	0	00.↑	43,260	00.0	0	00.0	0	AGENCY BUDGET ANALYST
00.0	0	00.1	000'99	00.0	0	00.0	0	AGENCY BUDGET SENIOR ANALYST
00.0	0	00.9	₱96'991	00.0	0	00.0	0	ACCOUNTS ASSISTANT

BUDGET

FY 2021

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SENIOR ACCOUNTS ASSISTANT

Decision Item

Budget Unit

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DECISION ITEM DETAIL

SECURED

DEPT REQ

EX 2022

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BUDGET

FY 2021

СОГЛШИ	СОГЛШИ	3T4	DOLLAR	3T7	DOLLAR	3T4	DOLLAR	Budget Object Class
								NOITARTSINIMOA 40 NOISIVIO
								ОВЕ
00.0	0	2.00	869'86	00.0	0	00.0	0	ACCOUNTS SUPERVISOR
00.0	0	00.9	016,782	00.0	0	00.0	0	ACCOUNTANT
00.0	0	2.00	113,156	00.0	0	00.0	0	INTERMEDIATE ACCOUNTANT
00.0	0	2.00	040,111	00.0	0	00.0	0	SENIOR ACCOUNTANT
00.0	0	00.4	282,119	00.0	0	00.0	0	ACCOUNTANT SUPERVISOR
00.0	0	00.1	171,84	00.0	0	00.0	0	ASSOCIATE AUDITOR
00.0	0	00.1	227,88	00.0	0	00.0	0	GRANTS MANAGER
00.0	0	00.4	969'091	00.0	0	00.0	0	PROCUREMENT ANALYST
00.0	0	00.1	691,84	00.0	0	00.0	0	PROCUREMENT SPECIALIST
00.0	0	20.1	149,69	00.0	0	00.0	0	PROCUREMENT SUPERVISOR
00.0	0	2.00	096'99	00.0	0	00.0	0	HUMAN RESOURCES ASSISTANT
00.0	0	3.00	078,811	00.0	0	00.0	0	HUMAN RESOURCES GENERALIST
00.0	0	2.00	608,46	00.0	0	00.0	0	HUMAN RESOURCES SPECIALIST
00.0	0	00.1	000,89	00.0	0	00.0	0	HUMAN RESOURCES MANAGER
00.0	0	00.1	218,812	00.0	0	00.0	0	DRIVER
00.0	0	00.1	34,126	00.0	0	00.0	0	MAINTENANCE/GROUNDS TECHNICIAN
00.0	0	00.1	974,88	00.0	0	00.0	0	MAINTENANCE/GROUNDS SUPERVISOR
00.0	0	35.77	3,564,221	35.77	3,564,221	90.09	266,188,2	29 - JATOT
00.0	0	00.0	186,325	00.0	ZE8,971	00.0	616,871	TRAVEL, IN-STATE
00.0	0	00.0	2,006	00.0	90£,1	00.0	018,1	TRAVEL, OUT-OF-STATE
00.0	0	00.0	500	00.0	500	00.0	0	FUEL & UTILITIES
00.0	0	00.0	Z90'169	00.0	801,037	00.0	377,249	SUPPLIES
00.0	0	00.0	972,48	00.0	772,11	00.0	926,18	PROFESSIONAL DEVELOPMENT
00.0	0	00.0	876'967	00.0	942,776	00.0	<i>ተ</i> ታይ'06ታ	СОММИИСАТІОИ ЗЕВУ & ЗИРР
00.0	0	00.0	300,255	00.0	210,232	00.0	283,775	PROFESSIONAL SERVICES
00.0	0	00.0	2,856	00.0	2,856	00.0	23	HOUSEKEEPING & JANITORIAL SERV
00.0	0	00.0	216,911	00.0	105,813	00.0	720,411	W&R SERVICES
00.0	0	00.0	235,472	00.0	235,472	00.0	218,266	MOTORIZED EQUIPMENT
00.0	0	00.0	ZEE,71	00.0	626'6	00.0	869' Z	OFFICE EQUIPMENT
00.0	0	00.0	12,405	00.0	004'9	00.0	889'8	ОТНЕК ЕДПРМЕИТ
00.0	0	00.0	752,27	00.0	7 62,237	00.0	12	РРОРЕЯТУ & ІМРРОУЕМЕИТЅ
00.0	0	00.0	8,920	00.0	Z99'Z	00.0	026,8	BUILDING LEASE PAYMENTS

BUDGET

FY 2021

ACTUAL

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ACTUAL

EX 2020

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Decision Item

Budget Unit

SECURED

DECISION ITEM DETAIL

00.0 00.0		18.21 77.28	862,27£ \$ 820,487,4 \$	18.21 87.28	862,27£ \$ 820,487,4 \$	4.82 52.20	894,43 <u>5</u> 2 226,473,52	GENERAL REVENUE FEDERAL FUNDS
00.0	0\$	3 6.77	689'9†0'9\$	38.77	689'970'9\$	90.09	1E0,26p,4\$	DATOT GNARÐ
00.0	0	00.0	32,510	00.0	10,500	00.0	36,510	Q9 - JATOT
00.0	0	00.0	35,510	00.0	10,500	00.0	35,510	DEBT SERVICE
00.0	0	00.0	2,446,808	00.0	818,174,2	00.0	4,774,529	33 - JATOT
00.0	0	00.0	457,8	00.0	685,8	00.0	122,1	MISCELLANEOUS EXPENSES
0.00	0	00.0	£78,4	00.0	711 ¹ 1	00.0	812,4	EQUIPMENT RENTALS & LEASES
								СОВЕ
								DIVISION OF ADMINISTRATION
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	Budget Object Class
SECURED	SECNBED	рея таза	рерт вед	BUDGET	BUDGET	AUTOA	AUTOA	Decision Item
******	******	FY 2022	FY 2022	FY 2021	FY 2021	E A 5050	FY 2020	Budget Unit

\$12,016\$

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142,563\$

OTHER FUNDS

\$12,016\$

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Department of Health and Senior Services

HB Section(s): 10.605, 10.610, 10.615, 10.620, 10.625.

Division of Administration

Program is found in the following core budget(s):

	Admin	Federal Grants and Donated Funds	Debt Offset Escrow	Refunds	HIF Transfer	TOTAL
GR	372,298	0	0	50,000	0	422,298
FEDERAL	4,764,026	3,107,174	0	100,000	0	7,971,200
OTHER	910,215	454,765	50,000	100,000	759,624	2,274,604
TOTAL	6,046,539	3,561,939	50,000	250,000	759,624	10,668,102

1a. What strategic priority does this program address?

Foster a sustainable, high-performing department.

1b. What does this program do?

The Division of Administration provides administrative and financial support services for the Department of Health and Senior Services (DHSS). The division includes Budget Services & Analysis, Financial Services, General Services, Human Resources, and Performance Management. The division assists the programmatic divisions to provide services to Missourians in a cost-effective manner which ensures fiscal accountability for taxpayer dollars.

- Budget Services & Analysis prepares the departmental budget submissions and responds to all budget-related inquiries and fiscal note requests from OA and the legislature.
- Financial Services includes accounts payable, grant accounting, funds accounting, and procurement, and processes all grant applications, initiates federal draws related to grants, prepares federal and state financial reports, and reviews and processes all contracts and procurements.
- · General Services provides warehouse, delivery, and mailroom services, including department fleet vehicle management.
- Human Resources provides personnel functions/employee relations, professional development, and recruitment.
- Performance Management oversees continuous improvement projects within DHSS. Projects include developing placemat initiatives, maintaining the department dashboard, and working cross-divisionally on continuous improvement projects with the department's Lean Six Sigma team.

2a. Provide an activity measure(s) for the program.

Services Provided by the Division of Administration in Support of Programmatic Functions							
Payment Documents	44,433	Fiscal Note Responses	722				
Purchase Orders and Modifications	11,553	Health Literature Mailed	1,659,447				
Grant and Contract Reports	863	Meds\Condoms Provided	33,984				
Contracts and Amendments	1,953	Printing Requisitions	761				
Audit Reports Reviewed	473	General Services Work Orders	1,286				
HR Staff Development Trainings	54	Dental Supplies Shipped	638,380				
Successful Placemat Initiatives	9	Lean Six Sigma Projects	2				
Supervisory Staff Training	898	General Staff Training	190				

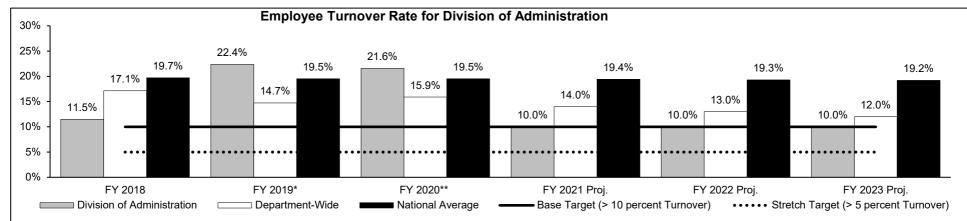
Department of Health and Senior Services

HB Section(s): 10.605, 10.610, 10.615, 10.620, 10.625.

Division of Administration

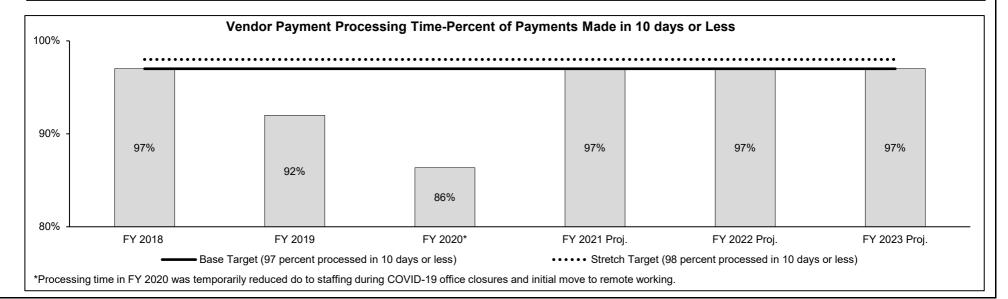
Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality.



^{*}In FY 2019 Office of Human Resource staff had five retirements which resulted in an increased vacancy rate.

National Average Source: US Department of Labor, Bureau of Labor Statistics. https://www.bls.gov/news.release/jolts.t16.htm



^{**}In FY 2020 The Division of Administration Financial Services had four retirements which resulted in an increased vacancy rate.

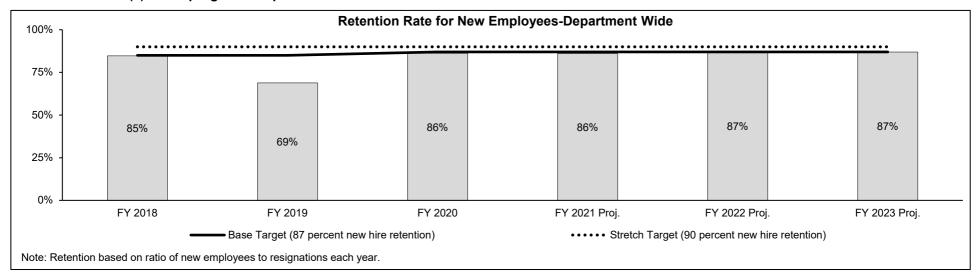
Department of Health and Senior Services

HB Section(s): 10.605, 10.610, 10.615, 10.620, 10.625.

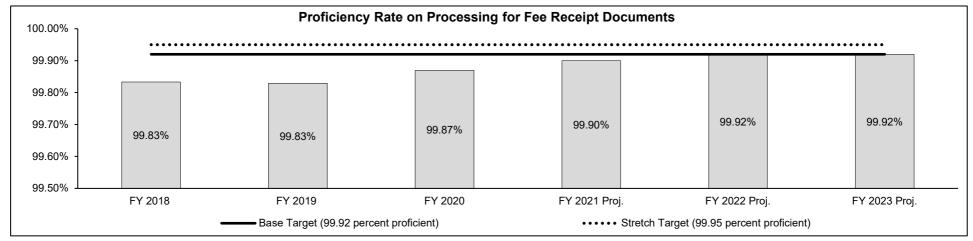
Division of Administration

Program is found in the following core budget(s):

2c. Provide a measure(s) of the program's impact.

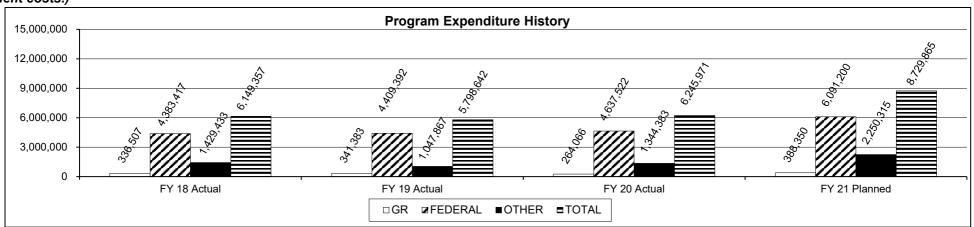


2d. Provide a measure(s) of the program's efficiency.



Department of Health and Senior Services	HB Section(s): 10.605, 10.610, 10.615, 10.620, 10.625.
Division of Administration	
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Nursing Facility Quality of Care (0271), Health Initiatives (0275), Health Access Incentives (0276), Mammography (0293), Missouri Public Health Services (0298), Endowed Cemetery Audit (0562), Professional and Practical Nursing Loans (0565), Department of Health and Senior Services Document Services (0646), Department of Health and Senior Services-Donated (0658), Criminal Record System (0671), Children's Trust (0694), Brain Injury (0742), Debt Offset Escrow (0753), Putative Father Registry (0780), Organ Donor (0824), and Childhood Lead Testing (0899).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Chapter 33, RSMo. - State Financial Administration, Chapter 34, RSMo. - State Purchasing and Printing, Section 37.450, RSMo. State Vehicle Fleet Manager, 1 CSR 10.3.010 Preapproval of Claims and Accounts, 1 CSR 10.11.010 State of Missouri Travel Regulations, 1 CSR 10.11.030 State of Missouri Vehicular Travel Regulations, 1 CSR 30.4 Facility Maintenance and Operation, 1 CSR 35.2.030.2 Leasing, 2 CFR Chapter 1, Chapter 11 Part 200, et al. Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, Cooperative Agreement with OA for payment processing, DHSS Internal Control Plan, Cash Management Improvement of 1990 and 1992 (Funds Accounting), and state and departmental policies and procedures.

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

No.

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58825C
Administration		
Core - Health Initiatives Fund Transfer	HB Section	10.610

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 202	2 Governor's	Recommendat	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	759,624	759,624	TRF	0	0	0	0
Total	0	0	759,624	759,624	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes but	dgeted in House	Bill 5 except for	certain fringes	budgeted	Note: Fringes b	udgeted in Hous	se Bill 5 except	for certain fring	es budgeted
directly to MoDO7	. Highway Patro	l. and Conserva	ntion.		directly to MoDO	DT. Highway Pat	rol. and Conse	rvation.	

Other Funds: Health Initiatives (0275).

2. CORE DESCRIPTION

The Health Initiatives Fund (Section 191.831, RSMo) receives revenue from a tax on cigarettes and smokeless tobacco products. This appropriation transfers monies from the Health Initiatives Fund to the Health Access Incentives Fund, from which the Office Rural Health and Primary Care expends funds for the Primary Care Resource Initiative for Missouri (PRIMO) Program.

3. PROGRAM LISTING (list programs included in this core funding)

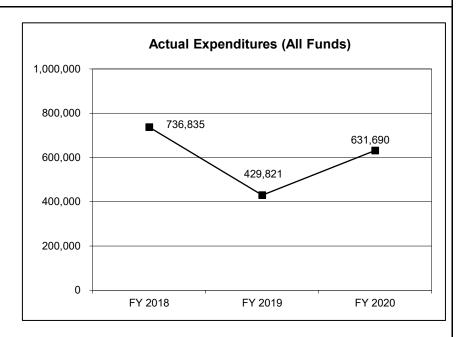
Health Initiatives

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58825C
Administration		
Core - Health Initiatives Fund Transfer	HB Section	10.610
		

4. FINANCIAL HISTORY

_	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	759,624	759,624	759,624	759,624
Less Reverted (All Funds)	(22,789)	(22,789)	(22,789)	•
Less Restricted (All Funds)	O O	0	0	0
Budget Authority (All Funds)	736,835	736,835	736,835	736,835
Actual Expenditures (All Funds)	736,835	429,821	631,690	N/A
Unexpended (All Funds)	0	307,014	105,145	N/A
Unexpended, by Fund: General Revenue Federal Other	0 0 0	0 0 307.014	0 0 105.145	N/A N/A N/A
Ottiei	U	307,014	100, 140	1 N / F



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVI-HEALTH INTITIATIVES-TRANSFER

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							DEPARTMENT CORE REQUEST
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						٦	5. CORE RECONCILIATION DETAI

DECISION ITEM SUMMARY

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Budget Unit Decision Item	FY 2020	FY 2020	FY 2021	FY 2021	FY 2022	FY 2022	******	*****

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DECISION ITEM DETAIL

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								HEALTH INTITIATIVES-TRANSFER	
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*****	******	FY 2022	FY 2022	FY 2021	FY 2021	EX 2020	FY 2020	Budget Unit	

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Health and Senior Services	Budget Unit	58055C
Administration		
Core - Debt Offset Escrow	HB Section	10.615

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 202	2 Governor's	Recommendat	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	50,000	50,000	TRF	0	0	0	0
Total	0	0	50,000	50,000	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes bu	dgeted in House	Bill 5 except for	certain fringes	budgeted	Note: Fringes b	udgeted in Hous	se Bill 5 except	for certain fring	es budgeted
directly to MoDO	T, Highway Patro	I, and Conserva	tion.		directly to MoDC	T, Highway Pat	rol, and Conse	rvation.	

Other Funds: Debt Offset Escrow (0753).

2. CORE DESCRIPTION

The Department of Revenue may intercept tax refunds from individuals who fail to meet financial obligations to state agencies pursuant to Sections 143.784-143.788, RSMo. This core request allows the Department of Health and Senior Services to receive intercepted tax refunds from individuals who fail to meet their obligations under the Health Professional Student Loan Repayment Program and Nursing Student Loan and Loan Repayment Programs.

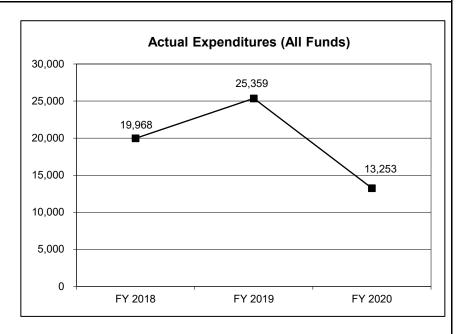
3. PROGRAM LISTING (list programs included in this core funding)

Debt Offset Escrow

Health and Senior Services	Budget Unit	58055C
Administration		
Core - Debt Offset Escrow	HB Section	10.615
		· · · · · · · · · · · · · · · · · · ·

4. FINANCIAL HISTORY

_	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	20,000	50,000	50,000	50,000
Less Reverted (All Funds)	0	0	0	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	20,000	50,000	50,000	50,000
Actual Expenditures (All Funds)	19,968	25,359	13,253	N/A
Unexpended (All Funds)	32	24,641	36,747	N/A
Unexpended, by Fund: General Revenue Federal Other	0 0 32	0 0 24,641	0 0 36,747	N/A N/A N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

DEBT OFFSET ESCROW

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noitsnafqx	Total E	Other	Federal	ЯЭ	ЭТЯ	Budget Class	
						ור	5. CORE RECONCILIATION DETA

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DECISION ITEM SUMMARY

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Decision Item Budget Object Summary Fund	FY 2020 ACTUAL BALLOR	PY 2020 AUTDAL ETE	FY 2021 BUDGET BOLLAR	FY 2021 BUDGET FTE	FY 2022 DEPT REQ DOLLAR	FY 2022 DEPT REQ FTE	COFONN	COLUMN

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SECURED	SECURED	DEPT REQ	DEPT REQ	BUDGET	BUDGET	AUTDA	AUTOA		Decision Item
*******	*****	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020		Budget Unit

Page 8 of 81 p.21/20 10:39 m_didetail

Health and Senior Services	Budget Unit	58040C
Administration		
Core - Refunds	HB Section	10.620

CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 202	2 Governor's	Recommendati	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	50,000	100,000	100,000	250,000	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	50,000	100,000	100,000	250,000	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes bu	dgeted in House	Bill 5 except for	certain fringes	budgeted	Note: Fringes	budgeted in Hous	se Bill 5 except	for certain fringe	es budgeted

directly to MoDOT, Highway Patrol, and Conservation.

directly to MoDOT, Highway Patrol, and Conservation.

Other Funds: Nursing Facility Quality of Care (0271), Health Access Incentives (0276), Mammography (0293), Missouri Public Health Services (0298), Endowed Care Cemetery Audit (0562), Professional and Practical Nursing Student Loan and Nurse Loan Repayment (0565), Veterans Health and Care (0606), Department of Health and Senior Services Document Services (0646), Department of Health and Senior Services-Donated (0658), Criminal Record System (0671), Children's Trust (0694), Brain Injury (0742), Organ Donor Program (0824), and Childhood Lead Testing (0899).

2. CORE DESCRIPTION

The Department of Health and Senior Services (DHSS) must be able to refund monies to citizens and other organizations when necessary. Refund appropriations provide DHSS with the mechanism to process refunds in a timely manner. Examples of refunds processed include: vital records, license application fees, on-site sewage disposal, construction permit fees, and DHSS training registration fees.

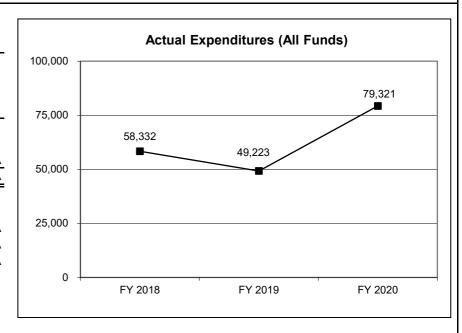
PROGRAM LISTING (list programs included in this core funding)

Refunds

Health and Senior Services	Budget Unit	58040C
Administration		
Core - Refunds	HB Section	10.620

4. FINANCIAL HISTORY

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	250,000	250,000	250,000	250,000
Less Reverted (All Funds)	0	0	0	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	250,000	250,000	250,000	250,000
Actual Expenditures (All Funds)	58,332	49,223	79,321	N/A
Unexpended (All Funds)	191,668	200,777	170,679	N/A
Unexpended, by Fund: General Revenue Federal Other	40,399 85,810 65,458	39,526 97,736 63,516	39,974 59,641 71,063	N/A N/A N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

DEPARTMENT OF HEALTH & SENIOR SERVING REFUNDS

	Total	00.0	900'09	۱00,000	000,001	720,000
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	DD	00.0	000'09	100,000	000,001	220,000
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DECISION ITEM SUMMARY

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DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

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								Coroner's Training Fund - 1580002
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00.0	0	00.0	52	0.00	52	00.0	0	ORGAN DONOR PROGRAM
00.0	0	00.0	100	0.00	100	00.0	0	BRAIN INJURY FUND
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00.0	0	00.0	333	00.0	333	00.0	0	CKIMINAL RECORD SYSTEM
00.0	0	00.0	12,133	00.0	12,133	00.0	503	DEPT OF HEALTH-DONATED
00.0	0	00.0	000,01	00.0	000,01	00.0	0	DEPT HEALTH & SR SV DOCUMENT
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								СОВЕ
								REFUNDS
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BUDGET

FY 2021

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EX 2020

AUTDA

FY 2020

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Budget Object Summary

Decision Item

FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58040C		DEPARTMENT : De	epartment of Health and Senior Services			
BUDGET UNIT NAME: Refunds		DIVISION: Division of Administration				
HOUSE BILL SECTION: 10.620		DIVISION: DIVISION	of Administration			
	and explain why the flexibi	lity is needed. If fle	expense and equipment flexibility you are exibility is being requested among divisions, ms and explain why the flexibility is needed.			
	DEPARTME	NT REQUEST				
The department requests continuation of fifty percent	nt (50%) flexibility for refunds be	etween federal and oth	er funds granted by the legislature in FY 2021.			
Year Budget? Please specify the amount.	ed for the budget year. Ho	w much flexibility v	was used in the Prior Year Budget and the Current			
	CURRENT Y	EAR	BUDGET REQUEST			
PRIOR YEAR	ESTIMATED AMO		ESTIMATED AMOUNT OF			
ACTUAL AMOUNT OF FLEXIBILITY USED	FLEXIBILITY THAT W		FLEXIBILITY THAT WILL BE USED			
\$0	HB 10.620 language allows up flexibility between federal and	other funds.	Expenditures will differ annually based on the needs of the department. Refunds are processed in cases of duplicate			
			payment, over payment, or payment in error. The department's requested flex will allow it to return citizen			
			monies in a timely manner and utilize available resources in			
		the most effective manner as the need arises. The				
			department cannot predict how much flexibility will be utilized.			
3. Please explain how flexibility was used in the	prior and/or current years.					
PRIOR YEAR			CURRENT YEAR			
EXPLAIN ACTUAL US	SE	EXPLAIN PLANNED USE				
Not applicable.		Not applicable.				

	OTHER FUNDS	986'87\$	00.0	000'001\$	00.0	000'00\\$	00.0		00.0
	FEDERAL FUNDS	69E'0 7 \$	00.0	000'001\$	00.0	000'00l\$	00.0		00.0
	GENERAL REVENUE	920,01\$	00.0	000'09\$	00.0	000'09\$	00.0		00.0
JATOT GNAЯĐ		126,67\$	00.0	\$220,000	00.0	\$220,000	00.0	0\$	00.0
DATOT		128,87	00.0	220,000	00.0	220,000	00.0	0	00.0
REFUNDS	_	128,97	00.0	250,000	00.0	220,000	00.0	0	00.0
СОКЕ									
REFUNDS									
Budget Object Class		DOLLAR	ЭТЯ	DOLLAR	3T7	DOLLAR	ЭТЯ	СОГЛШИ	СОГЛШИ
Decision Item		ACTUAL	AUTOA	BUDGET	BUDGET	рерт кед	DEPT REQ	SECNKED	SECNEED
Budget Unit		E A 5050	E A 5050	FY 2021	FY 2021	FY 2022	E A 5055	******	******

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Health and Senior Services	Budget Unit	58027C, 58029C
Administration	HB Section	10.625
Core - Federal Grants and Donated Funds		

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 2022	2 Governor's	Recommendati	ion	
	GR	Federal	Other	Total		GR	Fed	Other	Total	
PS	0	107,173	107,169	214,342	PS	0	0	0	0	
EE	0	582,725	53,938	636,663	EE	0	0	0	0	
PSD	0	2,417,276	293,658	2,710,934	PSD	0	0	0	0	
TRF	0	0	0	0	TRF	0	0	0	0	
Total	0	3,107,174	454,765	3,561,939	Total	0	0	0	0	
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00	
Est. Fringe	0	35,496	35,494	70,990	Est. Fringe	0	0	0	0	
Note: Fringes bu	dgeted in House	Bill 5 except for	certain fringes	budgeted	Note: Fringes be	udgeted in Hous	e Bill 5 except	for certain fringe	es budgeted	
directly to MoDO	T, Highway Patro	l, and Conserva	ntion.		directly to MoDC	directly to MoDOT, Highway Patrol, and Conservation.				

Other Funds: Department of Health and Senior Services-Donated (0658).

2. CORE DESCRIPTION

The Department of Health and Senior Services (DHSS) is authorized to receive federal and other funds for health-related purposes pursuant to Chapter 192, RSMo. The appropriation authority provided by this core is used by the department if new grant funding is received during the fiscal year and inadequate appropriation authority exists. The legislature and the Office of Administration are notified by DHSS prior to expenditure of such funds.

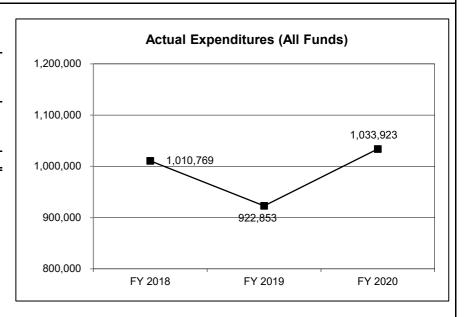
3. PROGRAM LISTING (list programs included in this core funding)

Federal Grants and Donated Funds

| Health and Senior Services | Budget Unit | 58027C, 58029C |
| Administration | HB Section | 10.625 |
| Core - Federal Grants and Donated Funds |

4. FINANCIAL HISTORY

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	3,554,663	3,555,179	3,558,817	3,561,939
Less Reverted (All Funds)	0	0	0	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	3,554,663	3,555,179	3,558,817	3,561,939
Actual Expenditures (All Funds)	1,010,769	922,853	1,033,923	N/A
Unexpended (All Funds)	2,543,894	2,632,326	2,524,894	N/A
Unexpended, by Fund:				
General Revenue	0	0	0	N/A
Federal	2,267,483	2,216,998	2,079,277	N/A
Other	276,411	415,328	445,617	N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

DEPARTMENT OF HEALTH & SENIOR SERVINGE SERVINGE

5. CORE RECONCILIATION DETAIL

	471,701,E	0	471,701,E	0	00.0	Total		
	972,714,2	0	972,714,2	0	00.0	DD		
	582,725	0	582,725	0	00.0	33		
	£71,701	0	£71,701	0	00.0	Sd		
						ORE	ОММЕИDED С	солевиов'я весс
	471,701,E	0	₽ ∠1,701,8	0	00.0	IstoT		
	2,417,276	0	972,714,2	0	00.0	DD		
	582,725	0	582,725	0	00.0	33		
	£71,701	0	£71,701	0	00.0	Sd		
							E REQUEST	DEPARTMENT CORI
	0	0	0	0	00.0	HANGES	О ТИЗМТЯАЧ	NET DEI
planned expenditures.								
Internal reallocations based on	(281,772)	0	(281,772)	0	00.0	ЪD	162 2123	Core Reallocation
planned expenditures.								
Internal reallocations based on	291,772	0	291,772	0	00.0	33	162 2123	Core Reallocation
						STN	BMTSULGA 3	DEPARTMENT CORI
	471,701,E	0	3,107,174	0	00.0	Total		
	2,694,438	0	2,694,438	0	00.0	ВЪ		
	302,563	0	302,563	0	00.0	33		
	£71,701	0	£71,701	0	00.0	Sd		
							S	EXECUTE: SET A STAT OF TOE
Explanation	I lstoT	Other	Federal		яр этт	Budget Slass		

DEPARTMENT OF HEALTH & SENIOR SERVINDONATED FUNDS

5. CORE RECONCILIATION DETAIL

		00.0	0	0	899,662	899,662	-
	33	00.0	0	0	886,83	826'29	8
	Sd	00.0	0	0	691,701	691,701	6
COVERNOR'S RECOMMENDED	ORE						
	Total	00.0	0	0	991,454	99८'७९७	=
		00.0	0	0	899'862	899,692	-
	33	00.0	0	0	866'65	826'29	8
	Sd	00.0	0	0	691,701	691,701	6
DEPARTMENT CORE REQUEST							
	IstoT	00.0	0	0	454,765	424,765	= <u>c</u>
	DD	00.0	0	0	899'862	899,692	-
	33	00.0	0	0	826'29	826'29	8
	Sd	00.0	0	0	691,701	691,701	6
TAFP AFTER VETOES							
	Budget Class	ЭТЯ	ЯЭ	Federal	Other	Total	Explanation

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Total

DECISION ITEM SUMMARY

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EX 2022

DEPT REQ

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BUDGET

FY 2021

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00.0	0\$	00.0	471,701,8 \$	00.0	471,701,8	20.0	\$1,026,444	JATOT UNARĐ
00.0	0	00.0	471,701,E	00.0	₽ ∠1,701,8	20.0	1,026,444	JATOT
00.0	0	00.0		00.0	2,694,438	00.0	253,433	GG - JATOT
00.0	0	00.0	972,714,2	00.0	2,694,438	00.0	253,433	PROGRAM-SPECIFIC DHSS-FEDERAL AND OTHER FUNDS
00.0	0	0.00	582,725	00.0	302,563	00.0	Z09 [°] 0ZZ	33 - JATOT
00.0	0	00.0	582,725	00.0	305,563	00.0	709,077	EXPENSE & EQUIPMENT DHSS-FEDERAL AND OTHER FUNDS
00.0	0	0.00	£71,701	00.0	871,701	20.0	7,404	29 - JATOT
00.0	0	00.0	£71,701	00.0	£71,701	20.0	2,404	DH28-FEDERAL AND OTHER FUNDS
								СОКЕ
								FEDERAL GRANTS
СОГЛШИ	СОГЛШИ	3T4	DOLLAR	3T4	ВОГГАВ	3T4	DOLLAR	Fund

BUDGET

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Budget Object Summary

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BUDGET

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00.0	0\$	00.0	99८'७९७\$	00.0	\$454,765	00.0	189 ,7\$	JATOT GNARÐ
00.0	0	00.0	454,765	00.0	994,484	00.0	78 8,7	JATOT
00.0	0	00.0	293,658	00.0	293,658	00.0		ad - JATOT
00.0	0	00.0	899'662	00.0	293,658	00.0	<u> 788,7</u>	PROGRAM-SPECIFIC DEPT OF HEALTH-DONATED
00.0	0	00.0	826'89	00.0	826'89	0.00	0	33 - JATOT
00.0	0	00.0	63,938	00.0	826,53	00.0	0	EXPENSE & EQUIPMENT DEPT OF HEALTH-DONATED
00.0	0	00.0	691,701	00.0	691,701	00.0	0	S9 - JATOT
00.0	0	00.0	691,701	00.0	691,701	00.0	0	PERSONAL SERVICES DEPT OF HEALTH-DONATED
								СОКЕ
								DONATED FUNDS
СОГЛШИ	СОГЛШИ	ЭТЯ	DOLLAR	3T4	DOLLAR	3T4	DOLLAR	pun

BUDGET

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Budget Object Summary

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EX 2022

BUDGET

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00.0 00.0 00.0		00.0 00.0 00.0	0\$ 1 /21,701,5\$ 0\$	00.0 00.0 00.0	0\$ 7/1,701,5 0\$	00.0 20.0 00.0	0\$ 0\$ 0\$	GENERAL REVENUE SUNUT LARDERAL FUNDS SUNUT REPLEMENTS
00.0	0\$	00.0	Þ ∠l'∠0l'E\$	00.0	Þ ∠l'∠0l'E\$	20.0	\$1,026,444	JATOT UNA RO
00.0	0	00.0	972,71 4 ,2	00.0	2,694,438	00.0	263,433	DG - JATOT
00.0	0	00.0	۵۲۲,۲۱ <i>۴</i> ,۵	00.0	2,694,438	00.0	253,433	PROGRAM DISTRIBUTIONS
00.0	0	00.0	582,725	00.0	302,563	00.0	409 '044	33 - JATOT
00.0	0	00.0	2,100	00.0	0	00.0	798,1	WISCELLANEOUS EXPENSES
00.0	0	00.0	104,122	00.0	1 98'98	00.0	217,050	OTHER EQUIPMENT
00.0	0	00.0	125,000	00.0	000'09	00.0	916,831	MOTORIZED EQUIPMENT
00.0	0	00.0	30,200	0.00	72 ⁹ 62 4	0.00	592,85	M&R SERVICES
00.0	0	00.0	Z £6'9 9	0.00	Z8 9'96	0.00	1,300	PROFESSIONAL SERVICES
00.0	0	00.0	408	0.00	804	0.00	0	COMMUNICATION SERV & SUPP
00.0	0	00.0	2,344	0.00	77 E'9	0.00	0	PROFESSIONAL DEVELOPMENT
0.00	0	00.0	09t,04r	0.00	188,78	0.00	325,209	SUPPLIES
0.00	0	00.0	2,905	0.00	2,905	0.00	0	TRAVEL, OUT-OF-STATE
00.0	0	00.0	046	0.00	026	0.00	0	TRAVEL, IN-STATE
00.0	0	00.0	£71,701	00.0	871,701	20.0	2,404	29 - JATOT
00.0	0	00.0	105,612	00.0	105,612		2,404	SPECIAL ASST PROFESSIONAL
00.0	0	00.0	199'1	0.00	199'1	0.00	0	PROJECT SPECIALIST
								СОКЕ
								FEDERAL GRANTS
СОГЛШИ	СОГЛШИ	3T4	DOLLAR	ЭТЯ	DOLLAR	ЭТЭ	DOLLAR	Budget Object Class

BUDGET

FY 2021

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Decision Item

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00.0 00.0		00.0 00.0	0\$ 0\$	00.0 00.0	0\$ 0\$	00.0 00.0	0\$ 0\$	GENERAL REVENUE FEDERAL FUNDS
00.0	0\$	00.0	99 <i>L</i> '†9†\$	00.0	99 ८ ' 7 97\$	00.0	78 2,7\$	DATOT DIAPA
00.0	0	00.0	899'662	00.0	899'662	00.0	78 3 ,7	Q9 - JATOT
00.0	0	00.0	293,658	00.0	293,658	00.0		PROGRAM DISTRIBUTIONS
00.0	0	00.0	23,938	00.0	23,938	00.0	0	33 - JATOT
00.0	0	00.0	<u>£7</u>	00.0	<u>E7</u>	00.0	0	WISCELLANEOUS EXPENSES
00.0	0	00.0	۱,600	00.0	۱,600	00.0	0	EQUIPMENT RENTALS & LEASES
00.0	0	00.0	100	00.0	100	0.00	0	BUILDING LEASE PAYMENTS
00.0	0	00.0	100	00.0	100	0.00	0	OTHER EQUIPMENT
00.0	0	00.0	100	0.00	100	0.00	0	OFFICE EQUIPMENT
00.0	0	00.0	07	00.0	07	00.0	0	W&R SERVICES
00.0	0	00.0	869'l	0.00	869'l	00.0	0	PROFESSIONAL SERVICES
00.0	0	00.0	916,52	00.0	916,52	0.00	0	COMMUNICATION SERV & SUPP
00.0	0	00.0	710,81	0.00	710,81	0.00	0	PROFESSIONAL DEVELOPMENT
00.0	0	00.0	18	0.00	18	0.00	0	SUPPLIES
00.0	0	00.0	₱9 ८ '↓	0.00	7 9∠'≀	0.00	0	TRAVEL, OUT-OF-STATE
00.0	0	00.0	609'₺	0.00	609'₺	0.00	0	TRAVEL, IN-STATE
00.0	0	00.0	691,701	0.00	691,701	00.0	0	29 - JATOT
00.0	0	00.0	690'98	00.0	690'98	00.0	0	SPECIAL ASST OFFICE & CLERICAL
00.00	0	00.0	72,100	00.0	72,100	00.0	0	SPECIAL ASST PROFESSIONAL
								СОВЕ
								DONATED FUNDS

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Budget Object Class

Decision Item

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EX 2022

DOLLAR

DEPT REQ

EX 2022

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BUDGET

FY 2021

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Division of Community & Public Health

Budget Unit 58030C

Est. Fringe

Community a	and Public Health								
Core - Division	on of Community a	ınd Public Heal	th Program O	perations	HB Section	10.700			
1. CORE FIN	ANCIAL SUMMAR	Y							
		FY 2022 Budg	et Request			FY 202	2 Governor's	Recommendat	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	6,582,643	15,896,964	2,476,940	24,956,547	PS	0	0	0	0
EE	70,900	4,673,721	874,927	5,619,548	EE	0	0	0	0
PSD	0	163,972	412,000	575,972	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	6,653,543	20,734,657	3,763,867	31,152,067	Total	0	0	0	0
FTE	132.50	302.67	58.12	493.29	FTE	0.00	0.00	0.00	0.00

Est. Fringe 4,041,531 9,516,983 1,636,832 15,195,346 Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

Other Funds: Health Initiatives (0275), Missouri Public Health Services (0298), Department of Health and Senior Services Document Services (0646), Environmental Radiation Monitoring (0656), Department of Health and Senior Services-Donated (0658), Hazardous Waste (0676), Putative Father Registry (0780), Organ Donor Program (0824), and Governor's Council on Physical Fitness Trust (0924).

2. CORE DESCRIPTION

Health and Senior Services

The Division of Community and Public Health (DCPH) requests core funding to support its responsibilities to protect the health of Missourians. DCPH works with communities, local public health agencies (LPHAs), schools, organizations, and the healthcare delivery system to support and strengthen Missouri communities through disease prevention and control, access to essential healthcare, and health/wellness education. Programs in the division support Missouri's public health network consisting of 114 LPHAs that are locally governed and financially supported through local and state funds. Missouri's public health system is responsible for monitoring the disease trends of death and disability, health-related behaviors, and other factors that affect health. Along with community partners, DCPH identifies and monitors risks including personal behavior, communicable disease exposure, and the environment.

This core funding supports the personnel responsible for disease control, prevention and emergency response (novel coronavirus, novel influenza strains, measles, mumps, sexually transmitted diseases, viral hepatitis, tuberculosis, West Nile, Zika, and other reportable communicable diseases); environmental health issues (foodborne illness outbreaks, radiological contamination, on-site sewage, retail food safety, food processing sanitation, lodging and childcare sanitation and safety inspections); Ryan White HIV/AIDS program; immunizations; newborn screening follow-up (Phenylketonuria (PKU), cystic fibrosis, sickle-cell, etc.); adolescent and school age children's health (teen pregnancy, injury, and violence prevention); newborn health (healthy pregnancy, breastfeeding, and home visiting); Children with Special Health Care Needs; Adult Brain Injury; Medically Fragile Adult Waiver; Healthy Children and Youth; Cancer and Chronic Disease Control (heart disease, diabetes, asthma, arthritis, organ and tissue donation, etc.); tobacco prevention and cessation (Quitline); obesity prevention; Nutrition Services (WIC, Summer Food); the Missouri Vital Records System; and collection, analysis, and distribution of health data.

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Health and Senior Services	Budget Unit	58030C
Community and Public Health		
Core - Division of Community and Public Health Program Operations	HB Section	10.700

PROGRAM LISTING (list programs included in this core funding)

All programs in the Division of Community and Public Health except:

Extended Women's Health Services Office of Rural Health and Primary Care

Local Public Health Services Core Funding Public Health/Healthcare Emergency Preparedness and Response Coordination

State Public Health Laboratory

Vital Records

Women's Health Initiatives Office of Minority Health

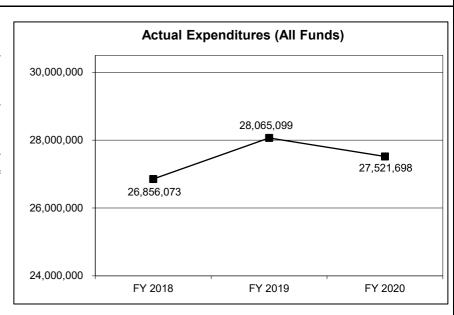
4. FINANCIAL HISTORY

Nutrition Services

Office of Dental Health

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual Yr.	FY 2021 Current Yr.
Appropriation (All Funds)	29,666,774	29,950,005	30,711,525	31,152,069
Less Reverted (All Funds)	(242,291)	(243,870)	(258,091)	(240,551)
Less Restricted (All Funds)*	0	0	0	(96,580)
Budget Authority (All Funds)	29,424,483	29,706,135	30,453,434	30,814,938
Actual Expenditures (All Funds)	26,856,073	28,065,099	27,521,698	N/A
Unexpended (All Funds)	2,568,410	1,641,036	2,931,736	N/A
Unexpended, by Fund:				
General Revenue	283	8,490	651,795	N/A
Federal	1,652,758	735,181	1,038,912	N/A
Other	915,368	897,365	1,241,029	N/A

^{*}Current Year restricted amount is as of 7/01/2020. Reverted includes the Governor's standard three percent reserve (when applicable).



Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

969'132 099'667 977,89E,1 00.0 ЬD 0 780,898,4 987,789 3,840,918 006'04 00.0 33 74,556,547 046,974,2 796'967'91 6,582,643 463.65 Sd **ZAFP AFTER VETOES** Explanation ЭТЭ Class Total Other Federal СВ Budget **5. CORE RECONCILIATION DETAIL** DIV COMMUNITY & PUBLIC HLTH DEPARTMENT OF HEALTH & SENIOR SERVI-

734,657

6,653,543

493.65

Total

31,152,069

698, £97, £

planned expenditures.								
Internal reallocations based on	† 0 †	† 0 †	0	0	00.0	33	193 1233	Core Reallocation
planned expenditures.								
Internal reallocations based on	(0)	0	0	0	(00.0)	Sd	193 1215	Core Reallocation
planned expenditures.								
Internal reallocations based on	(0)	0	0	0	00.0	Sd	193 1232	Core Reallocation
planned expenditures.								
Internal reallocations based on	(0)	0	0	0	(00.0)	Sd	193 1962	Core Reallocation
planned expenditures.								
Internal reallocations based on	(0)	0	0	0	(00.0)	Sd	E991 E61	Core Reallocation
planned expenditures.								
Internal reallocations based on	(0)	0	0	0	00.0	Sd	193 1247	Core Reallocation
planned expenditures.								
Internal reallocations based on	(0)	0	0	0	00.0	Sd	†961 E61	Core Reallocation
planned expenditures.								
Internal reallocations based on	0	0	0	0	(00.0)	Sd	193 1225	Core Reallocation
planned expenditures.								
Internal reallocations based on	000'007	0	400,000	0	(00.0)	Sd	193 1217	Core Reallocation
planned expenditures.								
Internal reallocations based on	0	0	0	0	(00.0)	Sd	193 1219	Core Reallocation
						STNE	MTSULQ/	DEPARTMENT CORE

DIV COMMUNITY & PUBLIC HLTH

5. CORE RECONCILIATION DETAIL

						SORE	NDED C	OWWE	СОЛЕВИОВ'S REC
	31,152,069	698,897,8	799,457,02	6,653,543	493.65	Total			
	976,878	412,001	163,974	0	00.0	DD			
	2 / 9'619'9	876,478	617,678,4	006'0ረ	00.0	33			
	Z4'996'7Z	2,476,940	₱96'968'G1	6,582,643	463.65	Sd			
							TS∃U	E REQ	DEPARTMENT COR
	(0)	0	0	0	(00.0)	HANGES	леит с	ИТЯАЧ:	NET DE
planned expenditures.									
Internal reallocations based on	(404)	(404)	0	0	00.0	ЬD	1233	193	Core Reallocation
planned expenditures.									
Internal reallocations based on	981,38	981,38	0	0	00.0	ВD	5697	193	Core Reallocation
planned expenditures.									
Internal reallocations based on	(400,000)	0	(400,000)	0	00.0	ЬD	1217	193	Core Reallocation
planned expenditures.									
Internal reallocations based on	(108,268)	0	(108,268)	0	00.0	БD	1218	193	Core Reallocation
planned expenditures.									
Internal reallocations based on	09 9 'Zħ	099'74	0	0	00.0	ВD	1230	193	Core Reallocation
planned expenditures.									
Internal reallocations based on	108,268	0	108,288	0	00.0	33	1218	193	Core Reallocation
planned expenditures.									
Internal reallocations based on	(681,85)	(681,86)	0	0	00.0	33	5697	193	Core Reallocation
planned expenditures.									
Internal reallocations based on	(095,74)	(47,560)	0	0	00.0	33	1230		Core Reallocation
						STN	AMTSL	JUGA 3	DEPARTMENT COR
Explanation	l lstoT	Other	Federal	Яэ	3T4	Budget Class			

PS 493.65 6,582,643 15,896,964 2,476,940 24,956,547 EE 0.00 70,900 4,673,719 EE 5,619,547

DEPARTMENT OF HEALTH & SENIOR SERVINION COMMUNITY & PUBLIC HLTH

	31,152,069	698'894'8	794,657	6,653,543	493.65	Total	
	916,818	412,001	₽76,£∂ſ	0	00.0	DD	
						ORE	СОЛЕВИОВ. В ВЕСОММЕИВЕВ С
zylanation	I lstoT	Other	Federal	В	3T4	Budget Class	
						ור	5. CORE RECONCILIATION DETA

DECISION ITEM SUMMARY

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EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

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СОГЛИИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	pun₃
								DIV COMMUNITY & PUBLIC HLTH
								COKE
								PERSONAL SERVICES
00.0	0	132.86	6,582,643	132.86	6,582,643	133.67	294,969,452	CENEKAL REVENUE
00.0	0	302.67	796'968'9l	302.67	796'967'9l	321.58	15,400,331	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	11.72	241,840,1 242,990	11.72	ZÞl,840,1	23.14	1,020,828	HEALTH INITIATIVES
00.0	0	10.50	Z1Z'E99	09.01	717,899	55.33	265,233	MO PUBLIC HEALTH SERVICES
00.0	0	13.8	169'64	13.8	169'64	60.0	787,8	DEPT HEALTH & SR SV DOCUMENT
00.0	0	00.1	105,47	00.1	105,47	18.0	707,81	ENVIRONMENTAL RADIATION MONITR
00.0	0	90.4	193,592	90 [.] 4	193,592	00.0	0	DEPT OF HEALTH-DONATED
00.0	0	4.50	218,288	09.4	218,288	4.25	6 7 6'661	HAZARDOUS WASTE FUND
00.0	0	3.00	742,88	3.00	743,58	24.1	777,04	PUTATIVE FATHER REGISTRY
00.0	0	34.1	799,711	34.1	795,711	76.↑	949'76	ОКСАИ DONOR PROGRAM
00.0	0	99.864	74,956,547	99.864	74,556,547	£7.194	23,207,640	29 - JATOT
								EXPENSE & EQUIPMENT
00.0	0	00.0	006'0᠘	00.0	006'0᠘	00.0	816,48	GENEKAL REVENUE
00.0	0	00.0	617,E78,4	00.0	816,0 1 8,8	00.0	3,550,723	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	333,575	00.0	097,868	00.0	401,815	HEALTH INITIATIVES
00.0	0	00.0	172,003	00.0	669'۱۲۱	00.0	009'17	MO PUBLIC HEALTH SERVICES
00.0	0	00.0	840,88	00.0	81/0,88	00.0	2,300	DEPT HEALTH & SR SV DOCUMENT
00.0	0	00.0	23,785	00.0	23,785	00.0	340	ENVIRONMENTAL RADIATION MONITR
0.00	0	00.0	85,400	00.0	904,28	00.0	0	DEPT OF HEALTH-DONATED
00.0	0	00.0	£88'99	00.0	£88'99	00.0	39,942	HAZARDOUS WASTE FUND
0.00	0	00.0	847,72	00.0	847,72	00.0	847,72	YAT2I9BA ABHTAH BVITATUA
0.00	0	00.0	986'79	00.0	100,546	00.0	828,7	ОРСАИ DONOR PROGRAM
00.0	0	00.0	009,74	00.0	005,74	00.0	0	GOV CNCL ON PHYS FITNESS TRUST
00.0	0	0.00	2 / 9'619'9	00.0	∠80'668' <i>†</i>	00.0	4,157,721	33 - JATOT
00 0	O	00 0	V20 63V	00 0	322 300 V	00 0	200 201	PLOGRAM-SPECIFIC
00.0	0	00.0	746,E31	00.0	347,89E,1	00.0	123,893	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	079,18	00.0	987'91	00.0	105,000	HEALTH INITIATIVES
00.0	0	00.0	051 130	00.0	†0†	00.0	0	MO PUBLIC HEALTH SERVICES
00.0	0	00.0	721,430	00.0	721,430	00.0	0	DEPT OF HEALTH-DONATED

BUDGET

FY 2021

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Budget Object Summary

Decision Item

DECISION ITEM SUMMARY

00.0	0\$	99.664	431,152,069	493.65	431,152,069	£7.194	\$27,605,403	DATOT GNARÐ
00.0	0	493.65	31,152,069	493.65	31,152,069	£7.19 <u>4</u>	27,605,403	JATOT
00.0	0	00.0	976,878	00.0	964,869,1	00.0	240,549	Q9 - JATOT
00.0	0	00.0	106,87	00.0	145,15	00.0	999'11	PROGRAM-SPECIFIC ORGAN DONOR PROGRAM
								СОКЕ
								DIV COMMUNITY & PUBLIC HLTH
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	ЭТЯ	DOLLAR	ЭТЯ	ВОГГАЯ	Pun4
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*******	*******	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit Decision Item

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FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58030C BUDGET UNIT NAME: Division of Community HOUSE BILL SECTION: 10.700	and Public Health		Department of Health and Senior Services on of Community and Public Health
requesting in dollar and percentage terms a	and explain why the flexibi	lity is needed. If	of expense and equipment flexibility you are flexibility is being requested among divisions, erms and explain why the flexibility is needed.
	DEPARTME	NT REQUEST	
The department requests continuation of thirty perce	ent (30%) flexibility between per	rsonal service and e	xpense and equipment granted by the legislature in FY 2021.
Estimate how much flexibility will be use Year Budget? Please specify the amount.	ed for the budget year. Ho	w much flexibilit	y was used in the Prior Year Budget and the Current
PRIOR YEAR ACTUAL AMOUNT OF FLEXIBILITY USED	CURRENT Y ESTIMATED AMO FLEXIBILITY THAT W	OUNT OF	BUDGET REQUEST ESTIMATED AMOUNT OF FLEXIBILITY THAT WILL BE USED
\$32,000	HB 10.700 language allows up (30%) flexibility between person expense and equipment.	to thirty percent	Expenditures will differ annually based on needs to cover operational expenses, address emergency and changing situations, etc. In addition, the level of governor's reserve, restrictions, and core reductions impact how the flexibility will be used, if at all. The department's requested flex will allow the department to utilize available resources in the most effective manner as the need arises. The department cannot predict how much flexibility will be utilized.
3. Please explain how flexibility was used in the	prior and/or current years.	1	· · · · · · · · · · · · · · · · · · ·
PRIOR YEAR EXPLAIN ACTUAL US	SE		CURRENT YEAR EXPLAIN PLANNED USE
Flexibility used between Medicaid and non-Medicaid	d appropriations.	Not applicable.	

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СОГЛИИ	СОГЛШИ	3T7	DOLLAR	3T4	DOLLAR	ЭТЭ	DOLLAR	Budget Object Class
								DIV COMMUNITY & PUBLIC HLTH
	•	300	•	_0 00	, 22 020	20 70		CORE
00.0	0	00.0	0	79.62	477,878	21.72	710,888	ADMIN OFFICE SUPPORT ASSISTANT
00.0	0	00.0	0	36.6 30.01	123,898	89.0	969,91	OFFICE SUPPORT ASSISTANT
00.0	0	00.0	0	28.84 28.84	£08,883,1	42.62 71.0	554,918 539 89	SR OFFICE SUPPORT ASSISTANT
00.0	0	00.0	0	2.61	77°778	71.2	238,88 139	INFORMATION SUPPORT COOR
00.0 00.0	0	00.0 00.0	0 0	00.0 00.0	0 0	10.0 00.0	77 77	INFORMATION TECHNOLOGIST III
00.0	0	00.0	0	00.0 98.1		2.00		INFORMATION TECHNOLOGY SPEC I ACCOUNT CLERK II
00.0	0	00.0	0	96.0	43,939 832,78	10.1	101,72 874,84	ACCOUNTANT II
00.0	0	00.0	0	00.0	2,144	00.0	0	ACCOUNTING SPECIALIST I
00.0	0	00.0	0	₽8.7	304,035	96.8	7 60'00 7	ACCOUNTING SPECIALIST II
00.0	0	00.0	0	96.0	967,54	66.0 69.0	412,004 412,004	ACCOUNTING SPECIALIST III
00.0	0	00.0	0	57.E	982,87	22.4	606'911	ACCOUNTING CLERK
00.0	0	00.0	0	78.0	167,16	£1.1	799,85	RESEARCH ANAL I
00.0	0	00.0	0	†9°†	213,786	91.5	708,721	RESEARCH ANAL II
00.0	0	00.0	0	22.40	027,878	90.51	061,363	RESEARCH ANAL III
00.0	0	00.0	0	†9 [.] 9	382,098	£8.7	423,093	RESEARCH ANAL IV
00.0	0	00.0	0	68.0	066'29	GT.0	487,14	PUBLIC INFORMATION COOR
00.0	0	00.0	0	77.1	149,26	10.1	070,84	TRAINING TECH II
00.0	0	00.0	0	68.0	6+2++9	96.0	109'09	TRAINING TECH III
00.0	0	00.0	0	98.1	25,442	2.00	729'99	EXECUTIVE I
00.0	0	00.0	0	19.4	174,295	97.4	£09,£71	EXECUTIVE II
00.0	0	00.0	0	28.1	694,48	2.48	125,293	MANAGEMENT ANALYSIS SPEC II
00.0	0	00.0	0	37.1	768,101	2.00	106,344	II AJNNAJA
00.0	0	00.0	0	9.38	552,755	78.6	242,493	PLANNER III
00.0	0	00.0	0	97.7	210,762	10.03	328,858	HEALTH PROGRAM REP I
00.0	0	00.0	0	42.44	771,837,1	42.36	870,037,1	HEALTH PROGRAM REP II
00.0	0	00.0	0	1 0.03	2,413,435	16.94	2,081,548	HEALTH PROGRAM REP III
00.0	0	00.0	0	19.2	125,869	t9.4	Z2 4 '991	HEALTH PROGRAM COORDINATOR
00.0	0	00.0	0	00.0	0	00.0	129	DEBROONNEL CLERK
00.0	0	00.0	0	78.0	28,938	97.0	24,356	I JANA JVITARTSINIMDA
00.0	0	00.0	0	48.1	079,17	£8.1	969'84	II JANA JVITARTSINIMDA
00.0	0	00.0	0	6.53	30,725	94.0	740,22	OCCUPTAL SFTY & HLTH CASLT II

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EX 2022

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СОГЛШИ	СОГЛШИ	ЭТЭ	DOLLAR	3T4	DOLLAR	ЭТЯ	DOLLAR	Budget Object Class
								DIV COMMUNITY & PUBLIC HLTH
								СОКЕ
00.0	0	00.0	0	00.0	016	00.0	0	HEALTH EDUCATOR I
00.0	0	00.0	0	19.2	105,525	28.2	909,011	HEALTH EDUCATOR II
00.0	0	00.0	0	3,48	764,491	3.27	۲۱6'99۱	HEALTH EDUCATOR III
00.0	0	00.0	0	3.09	206,224	58.5	426,712	SPEC HLTH CARE NEEDS REG COORD
00.0	0	00.0	0	18.43	910,833	86.31	699,627	EPIDEMIOLOGY SPECIALIST
00.0	0	00.0	0	87.81	128,947	15.36	217,408	SENIOR EPIDEMIOLOGY SPECIALIST
00.0	0	00.0	0	Z9.Z	187,230	18.2	£17,£31	PUBLIC HEALTH EPIDEMIOLOGIST
00.0	0	00.0	0	00.0	0	20.0	1,232	HEALTH FACILITIES CNSLT
00.0	0	00.0	0	3.49	769,871	3.00	138,263	COOR OF CHILDRENS PROGRAMS
00.0	0	00.0	0	19.2	Z†6'06	24.1	1 89'99	I TSINOITIATUN
00.0	0	00.0	0	87.41	894,707	12.86	602,749	NUTRITIONIST III
00.0	0	00.0	0	9Z.11	199,799	49.7	664,868	NUTRITION SPECIALIST
00.0	0	00.0	0	97.0	76,150	12.71	972,664	PUBLIC HEALTH DATA TECH I
00.0	0	00.0	0	94.0	792,82	00.1	31,460	PUBLIC HEALTH DATA TECH II
00.0	0	00.0	0	00.0	0	3.30	Z12,201	PUBLIC HEALTH DATA SUPERVISOR
00.0	0	00.0	0	68.0	138,623	6 1 .0	120,07	MEDICAL CNSLT
00.0	0	00.0	0	00.0	0	42.1	619,73	REGISTERED NURSE
00.0	0	00.0	0	00.0	0	00.0	98	HEALTH FACILITIES NRSNG CNSLT
00.0	0	00.0	0	00.0	0	00.0	۲۱ ۲۱	FACILITY ADV NURSE II
00.0	0	00.0	0	00.0	0	00.0	72	FACILITY ADV NURSE III
00.0	0	00.0	0	99.71 13.6	1,154,926	96.81	272,186	PUBLIC HEALTH NURSE
00.0	0	00.0	0	13.5	911,122	13.38	127,847	PUBLIC HEALTH SENIOR NURSE
00.0	0	00.0	0	60.8	645,343	10.53	906'9†9	PUBLIC HEALTH CONSULTANT NURSE
00.0	0	00.0	0	72.41	۶26,224 م	04.81	984,789 664 h	PROGRAM COORD DMH DOHSS
00.0	0	00.0	0	00.0	0	86.0 30.1	14,521	ENV PUBLIC HEALTH SPEC III
00.0	0	00.0	0	00.0	26Z,1	90.1 81.51	599,15 57,953	ENV PUBLIC HEALTH SPEC IV
00.0	0	00.0	0	19.91	645,800 945,73 <i>h</i>	31.81 30.7	992,323	ENV PUBLIC HEALTH SPEC V
00.0	0	00.0	0 0	00.8	187,784 187,784	∂9.7 47.1	432,465	ENVIRONIMENTAL SPEC II
00.0		00.0	0	28.1 50.01	709,07	9 1 .11	710,828 710,828	ENVIRONMENTAL SPEC III
00.0 00.0	0	00.0 00.0	0	76.01 31.1	196,242 14,694	96.0	187,28	ENVIRONMENTAL SPEC III ENVIRONMENTAL SPEC III
00.0	0	00.0	0	9E.1	291,87	04.1	862,87	ENVIRONMENTAL SCIENTIST

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00.0 00.0	0	00.0 00.0	0	3 1 .8 00.0	781,812 0	3.70 00.0	801,0S2 11	ENVIRONMENTAL SUPPRERVISOR ADLT PROT & CMTY SUPV
00.0	0	00.0	0	00.0	0	42.0	999'6	ADLT PROT & CMTY WKR II
0.00	0	00.0	0	27.1	∠ 69' ∠ 6	1.24	191,18	CLINICAL SOCIAL WORK SPV
00.0	0	00.0	0	88.0	48,302	00.1	889,03	VIDEO SPECIALIST
00.0	0	00.0	0	4.50	326,442	4.02	280,573	FISCAL & ADMINISTRATIVE MGR B1
00.0	0	00.0	0	29.1	116,245	28.1	627,111	RESERRCH MANAGER B1
00.0	0	00.0	0	£9.1	122,345	89.1	124,889	REGISTERED NURSE MANAGER B1
00.0	0	00.0	0	74.18	799,486,2	12.88	768,6446,894	HEALTH & SENIOR SVCS MANAGER 1
00.0	0	00.1	113,300	00.1	105,438	48.0	987'06	DIVISION DIRECTOR
00.0	0	00.1	91,829	00.1	096'96	98.0	712,87	DEBOLA DIVISION DIRECTOR
00.0	0	2.00	684,211	2.00	789'811	98.1 03.5	169,601	DESIGNATED PRINCIPAL ASST DIV
00.0	0	£9.01	324,037	06.01	£47,674	69.7	870,088	PROJECT SPECIALIST
00.0	0	3.24	749,812	3.24	749,812	10.8	148,861	FEGAL COUNSEL
00.0	0	9 1 .0	816,42	9ħ.0	816,42	££.0	379,75	CHIEL COUNSEL
00.0	0	9 1 .0	320,78	9 1 .0	320,78	9 1 .0	387,82	ZENIOR COUNSEL
00.0	0	2.08	766'ZE	30.6	981,42	99.2	866,67	
00.0	0	00.0	0	00.0	0	40.0 36.8	457,1 457,1	MISCELLANEOUS PROFESSIONAL
00.0	0	02.8 00.0	542,253 642,263	00.0	156,575	35.8 91.0	017,124	SPECIAL ASST PROFESSIONAL
00.0	0	00.0	0	00.0	0	81.0	797 [°] 8	SPECIAL ASST OFFICE & CLERICAL
00.0	0	14.1 14.63	790°19	00.0	0	00.0	0	ADMINISTRATIVE SUPPORT CLERK
00.0	0	63.41	091,169,1	00.0	0	00.0	0	TWATSISSA TAOPPO SUMDA TWATSISSA TAOPPO SUMDA DA 3 L
00.0	0 0	18.39 8.39	792 30E	00.0	0	00.0	0 0	LEAD ADMIN SUPPORT ASSISTANT LEAD ADMIN SUPPORT PROFESSIONAL
00.0 00.0	0	04.01	413 E14	00.0 00.0	0	00.0 00.0	0	PROGRAM ASSISTANT
00.0	0	69.1	249'96 849'814	00.0	0	00.0	0	PROGRAM SPECIALIST
00.0	0	89.8	547,443	00.0	0	00.0	0	SENIOR PROGRAM SPECIALIST
00.0	0	67.0	017,02	00.0	0	00.0	0	PROGRAM MANAGER
00.0	0	70.7	26,716	00.0	0	00.0	0	ASSOC RESEARCH/DATA ANALYST
00.0	0	74.22	911,502	00.0	0	00.0	0	RESERRCH/DATA ANALYST
00.0	0	69.3	700, 446 720, 446	00.0	0	00.0	0	SEUIOR RESEARCH/DATA ANALYST
00.0	0	1.59	l † † † † 6	00.0	0	00.0	0	RESEARCH DATA ANALYSIS SPV/MGR

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dget Object Class	DOLLAR	317	DOLLAR	313	DOLLAR	3T1	СОГЛШИ	СОГЛШИ
MMUNITY & PUBLIC HLTH								
IIOR MULTIMEDIA SPECIALIST	0	00.0	0	00.0	064,64	6Ł.0	0).0
SLIC RELATIONS COORDINATOR	0	00.0	0	00.0	108,991	1.58	0).0
TRITIONIST	0	00.0	0	00.0	048,840	75.2	0).0
TRITION SPECIALIST	0	00.0	0	00.0	182,209	38.11	0	0.0
TSINOITIATUN AOII	0	00.0	0	00.0	906,306	10.38	0).0
SISTERED NURSE	0	00.0	0	0.00	1,946,826	16.08	0).0
SISTERED NURSE SPEC/SPV	0	00.0	0	0.00	939,830	67.7	0).0
SSE MANAGER	0	00.0	0	0.00	64,553	88.0	0).0
EF PHYSICIAN	0	00.0	0	0.00	126,784	98.0	0).0
ENSED CLINICAL SOCIAL WKR	0	00.0	0	0.00	t62'3bt	87.0	0).0
NICAL SOCIAL WORK SPV/SPEC	0	00.0	0	0.00	997,94	87.0	0).0
FF DEVELOPMENT TRAINER	0	0.00	0	0.00	39,100	88.0	0	0.0
FF DEV TRAINING SPECIALIST	0	00.0	0	0.00	197'9 7	38.0	0).0
STAFF DEV TRAINING SPEC	0	00.0	0	0.00	162,03	28.0	0).0
DEESSIONAL ENGINEER	0	00.0	0	0.00	123,775	33.1	0).0
TSSA MAROGRAM ASST	0	00.0	0	0.00	898,75	18.0	0).0
TSYJANA MAROGRAM ANALYST	0	00.0	0	00.0	016,310	9E.11	0).0
NRONMENTAL PROGRAM SPEC	0	00.0	0	00.0	88,215	14.1	0).0
VAS MARODAY JATNAMORIV	0	00.0	0	00.0	747,42 4	00.9	0).0
MRONMENTAL PROGRAM MANAGER	0	00.0	0	00.0	129,057	۲9 ^۰ ۱	0).0
TNATSISSA STNUO	0	00.0	0	0.00	222,009	17.8	0).0
TNATNUO	0	00.0	0	0.00	991,014	88.6	0).0
ERMEDIATE ACCOUNTANT	0	00.0	0	0.00	48,245	66.0	0).0
ROSIVA SUBSTITUTION	0	00.0	0	0.00	016,831	76.2	0	0.0
ABDANAM TNATNUO	0	00.0	0	0.00	620'69	66.0	0	0.0
SIAL SERVICES SPECIALIST	0	0.00	0	00.0	809'99	14.1	0	0.0
SOCIATE EPIDEMIOLOGIST	0	0.00	0	00.0	489 '688	92.71	0	0.0
DEWIOFOCIST	0	00.0	0	00.0	092'966	22.71	0	0.0
NOR EPIDEMIOLOGIST	0	0.00	0	00.0	946,871	2.29	0	0.0
DEMIOLOGY MANAGER	0	00.0	0	0.00	977,77	28.0	0	0.0
SLIC HEALTH ENV ASSOCIATE	0	00.0	0	00.0	141,55	08.0	0	0.0
SLIC HEALTH ENV OFFICER	0	00.0	0	00.0	271,621	2.39	0	0.0

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Decision Item

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DEPT REQ

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00.0		21.83	698'894'8\$	58.12	698'894'8\$	36.48	980,272,2\$	отнек ғимра
00.0		302.67	\$50,734,657	302.67	\$50,734,657	321.58	419,278,947	FEDERAL FUNDS
00.0		132.86	£ 1 943	132.86	£ 7 9'659'9\$	133.67	04£ ' 790'9\$	GENERAL REVENUE
00.0	0\$	493.65	690,231,16\$	493.65	690,231,16\$	£7.194	\$27,605,403	датот пияя
00.0	0	00.0	946,848	00.0	۱'969' ۱ عو	00.0	240,549	αq - JATOT
00.0	0	00.0	976,878	00.0	964,696,1	00.0	<u>240,549</u>	PROGRAM DISTRIBUTIONS
00.0	0	00.0	4 7 9'619'9	00.0	780,868, <u>4</u>	00.0	4,157,214	33 - JATOT
00.0	0	00.0	248,948	00.0	162,832	00.0	Z09'†01	WISCELLANEOUS EXPENSES
00.0	0	00.0	998'9	00.0	807,7	00.0	£09't	EQUIPMENT RENTALS & LEASES
00.0	0	00.0	45,045	00.0	160,68	00.0	35,641	BUILDING LEASE PAYMENTS
00.0	0	00.0	202,290	00.0	126,324	00.0	138,245	OTHER EQUIPMENT
00.0	0	00.0	9 4 9'Ł	00.0	111,72	00.0	008'9	OFFICE EQUIPMENT
00.0	0	00.0	311,811	00.0	121,513	00.0	544,359	W&R SERVICES
00.0	0	00.0	91	00.0	0	00.0	11	HOUSEKEEPING & JANITORIAL SERV
00.0	0	00.0	1,680,725	00.0	2,108,428	00.0	1,235,251	PROFESSIONAL SERVICES
00.0	0	00.0	890,771	00.0	74,083	00.0	146,951	COMMUNICATION SERV & SUPP
00.0	0	00.0	330,028	00.0	312,488	00.0	528,306	PROFESSIONAL DEVELOPMENT
00.0	0	00.0	768,126,1	00.0	06۲,۲40,١	00.0	1,227,691	SUPPLIES
00.0	0	00.0	901	00.0	0	00.0	08	FUEL & UTILITIES
00.0	0	00.0	719°E7E	00.0	362,326	00.0	564,130	TRAVEL, OUT-OF-STATE
00.0	0	00.0	894,748	00.0	266,893	00.0	689'967	TRAVEL, IN-STATE
00.0	0	493.65	74,956,547	493.65	24,556,547	£7.194	23,207,640	89 - JATOT
00.0	0	13.0	Z90'6Z	00.0	0	00.0	0	SR HEALTH AND SAFETY ANALYST
00.0	0	79 [.] 61	783,613,1	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM MANAGER
00.0	0	23.39	1,517,513	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM SPV
00.0	0	39.91	672,249	00.0	0	00.0	0	SR PUBLIC HEALTH PROGRAM SPEC
00.0	0	98.44	۲+48,441	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM SPEC
00.0	0	82.88	1,700,393	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM ASSOC
00.0	0	04.8	964,828	00.0	0	00.0	0	PUBLIC HEALTH ENV SUPERVISOR
00.0	0	12.06	910'769	00.0	0	00.0	0	PUBLIC HEALTH ENV SPECIALIST
								COKE
								DIV COMMUNITY & PUBLIC HLTH

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BUDGET

FY 2021

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EX 2020

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BUDGET

FY 2021

DOLLAR

DEPT REQ

EX 2022

Budget Object Class

Decision Item

Budget Unit

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PROGRAM DESCRIPTION

Health and Senior Services

Community and Public Health Administration

Program is found in the following core budget(s):

DCPH Program

Office of Emergency

HB Section(s): 10.700, 10.755

r regram to reache in the renewing core sauget(o).						
	DCPH Program Operations	Office of Emergency Coordination				TOTAL
GR	395,893	0				395,893
FEDERAL	1,096,083	37,527				1,133,610
OTHER	1,081,238	0				1,081,238
TOTAL	2,573,214	37,527				2,610,741

1a. What strategic priority does this program address?

To protect health and keeps people of Missouri safe.

1b. What does this program do?

This program provides leadership, oversight, and general supervision for the division staff and programs/initiatives in accordance with the mission, goals, and values of the department, and ensures compliance with state and federal laws and regulations. This is achieved through the following activities:

- Approving contracts, grant applications, personnel actions, and correspondence with contractors, consumers, other external partners, and stakeholders.
- Providing public health emergency preparedness, fiscal management, policy development, personnel and human resource management, health information system coordination, strategic planning, and assurance of effective and efficient programs.
- Providing responses to legislative requests and fiscal notes.

2a. Provide an activity measure(s) for the program.

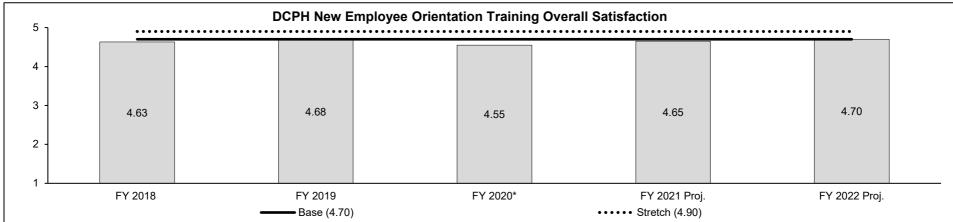
Services Provided by Division of Community and Public Health (DCPH) Director's Office in Support of Programmatic Functions					
FY 2020					
Invoices Processed	17,446	Contracts Processed	2,785		
Purchase Orders Processed	8,886	Fiscal Note Responses	490		
Grants Managed	145	DCPH New Employee Orientation Attendees	64		

PROGRAM DESCRIPTION

Health and Senior Services	HB Section(s): 10.700, 10.755
Community and Public Health Administration	-

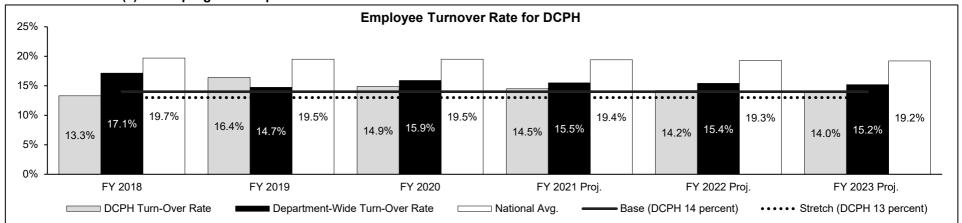
Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality.



The score is the average rating by the participants regarding their overall satisfaction with the training. The rating scale is from 1 to 5, with 5 being Excellent. *FY 2020 trainings were put on hold due to COVID-19. Data is therefore based off of a smaller sample size of survey respondants.

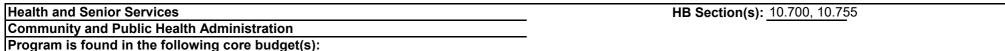
2c. Provide a measure(s) of the program's impact.



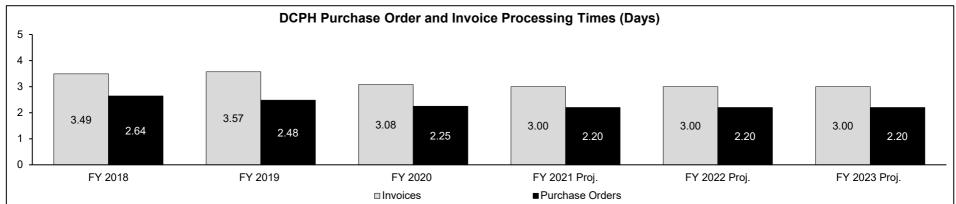
National Average data is from Bureau of Labor and Statistics and reflects the average for State and Local Governments (excluding education). US Department of Labor, Bureau of Labor Statistics. https://www.bls.gov/news.release/jolts.t16.htm (Last updated March 2020)

The Department modified the methodology of calculating vacancies in July 2019 to reflect a more accurate calculation.

PROGRAM DESCRIPTION



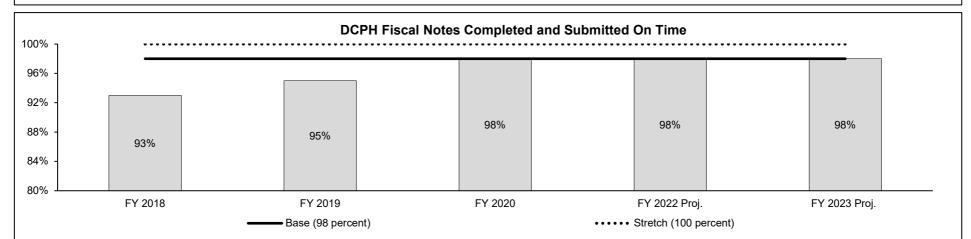
2d. Provide a measure(s) of the program's efficiency.



*MissouriBUYS was implemented during the last quarter of FY 2018 and has contributed to the slight increase in processing times. As staff become more familiar and gain knowledge with the requirements of the processing system, it is estimated that the average time will decrease in the following years.

Invoices: Base Target - 3 Stretch Target - 2.5

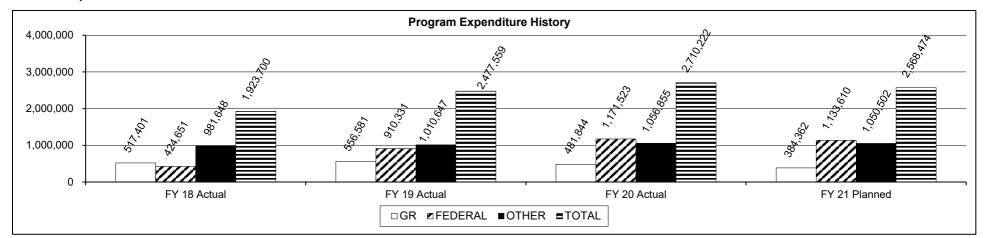
Purchase Orders: Base Target - 2 Stretch Target - 1.5



Total number of fiscal notes DCPH received: 2018 = 699, 2019 = 544, and 2020 = 490. In order for a fiscal note to meet the definition of "on time" it must be completed and submitted by the due date established by DHSS Admin.

Health and Senior Services	HB Section(s): 10.700, 10.755
Community and Public Health Administration	
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other" funds?

Health Initiatives (0275) and Missouri Public Health Services (0298).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Provisions from multiple chapters of state statute and federal laws are applicable to the operations of the Division of Community and Public Health. State and federal authority for specific activities are included on the division's program description pages.

6. Are there federal matching requirements? If yes, please explain.

Programs within the Division receive approximately 80 percent of their funding through federal sources. The federal funding sources received by the Division that require match and the amount of state match required by each are: Cancer Grant: Cancer Registry (25 percent), Cancer Grant: Breast and Cervical Screening (25 percent), Maternal and Child Health Block Grant (43 percent), Public Health Emergency Preparedness & Hospital Preparedness Program (10 percent), Radon (40 percent), Ryan White Part B (33 percent), Title XIX (25 percent to 35 percent), Traumatic Brain Injury Grant (33 percent), and WISEWOMAN (25 percent). The federal funding and the required matching funds are found throughout the Division of Community and Public Health, the Department, and in some instances other state agencies. The programs that utilize the funding have noted the federal matching requirements within their specific program description.

7. Is this a federally mandated program? If yes, please explain.

The federal mandate for specific activities is included on division program description pages.

Health and Senior Services Vital Records					HB Section(s): 10.700				
					_'				
Program is found	in the following core budge	et(s):			-				
	DCPH Program								
	Operations								TOTAL
GR	1,157,061								1,157,061
FEDERAL	360,398								360,398
OTHER	134,385								134,385
TOTAL	1,651,844								1,651,844

1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need.

1b. What does this program do?

The Bureau of Vital Records is the repository of vital records for the State of Missouri and provides citizens and federal, state, and local agencies the ability to register, amend, and obtain vital records and health and statistical information critical to identifying and qualifying health related issues and measuring progress toward quality improvement and public health goals. Activities include:

- Maintaining the central registry of births, deaths, reports of fetal deaths, reports of marriages and divorces, and the Putative Father Registry.
- Correcting or amending vital records as authorized by state law, to include court orders or as a result of adoption or legitimation.
- Issuing certified and non-certified copies of births, deaths, reports of fetal deaths, original pre-adoptive records, and statements relating to marriages and divorces.
- Conducting workshops and trainings, as well as querying of records and providing technical assistance to ensure the complete, accurate, and timely
 registration of vital records.

Life Events Requiring a Vital Record								
Birth Certificate Death Certificate Marriage/Divorce Record Fetal Death Certificate								
Identification	Receive Insurance benefits	Driver's License Documentation	Tax Purposes					
School Registration	Death Investigation	Tax Purposes	Research Purposes					
Driver's License Documentation	State Agency Program Removal	Receipt of Insurance Benefits						
Voter ID	Cease Benefits	Proof of Marriage	Paternity Documents					
Passport	Research Purposes	Proof of Divorce	Proof of Paternity					
Genealogical Purposes	Release from Legal Obligations	Research Purposes	Research Purposes					
Research Purposes	(leases, titles, etc.)							

Health and Senior Services	HB Section(s): 10.700
Vital Records	· · · <u> </u>

Program is found in the following core budget(s):

2a. Provide an activity measure(s) for the program.

Records Issued and Registered										
Year	Birth		Death		Fetal Death		Marriage		Divorce	
i eai	Issued	Issued Registered Issued Registered Issued Registered		Registered	Issued Registered		Issued	Registered		
CY 2018	43,859	79,028	10,511	68,469	19	492	2,767	39,345	693	18,559
CY 2019	48,119	69,034	10,366	60,574	1	550	2,767	37,584	772	17,851
CY 2020 Proj.	45,029	75,859	11,094	64,845	15	532	2,714	38,998	720	18,677
CY 2021 Proj.	45,669	74,640	11,046	64,629	12	525	2,749	38,642	728	18,362
CY 2022 Proj.	46,272	73,178	11,046	63,350	9	535	2,743	38,408	740	18,297
CY 2023 Proj.	45,657	74,559	11,062	64,275	12	531	2,736	38,683	729	18,445

Note: Records are issued when they are provided to an individual upon request. Records are registered when they are officially filed with the state.

Amendments to Previously Registered Vital Records				Vital Records Clients Served					
Year	Adoptions	Legitimations	Birth	Death	Year	Mail	Phone	VitalChek	In Person
CY 2018	2,572	133	6,496	2,257	CY 2018	64,216	113,590	18,442	5,653
CY 2019	6,055	116	8,221	2,941	CY 2019	66,063	113,037	20,072	6,456
CY 2020 Proj.	4,126	123	7,572	2,971	CY 2020 Proj.	65,629	109,930	19,735	5,672
CY 2021 Proj.	4,251	124	7,430	2,723	CY 2021 Proj.	65,303	112,186	19,416	5,927
CY 2022 Proj.	4,811	121	7,741	2,878	CY 2022 Proj.	65,665	111,718	19,741	6,018
CY 2023 Proj.	4,396	122	7,581	2,857	CY 2023 Proj.	65,532	111,278	19,631	5,872
					Note: VitalChek is a 3rd party s	ervice offered for or	derina expedited	certificates onlin	e with a credit

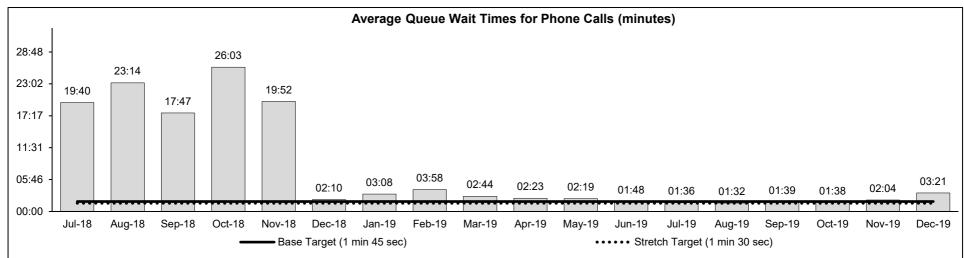
Note: Served by the state vital records office. This does not reflect local registrar activities.

Note: VitalChek is a 3rd party service offered for ordering expedited certificates online with a credit card.

Vital Records	Health and Senior Services	HB Section(s): 10.700
That Records	Vital Records	

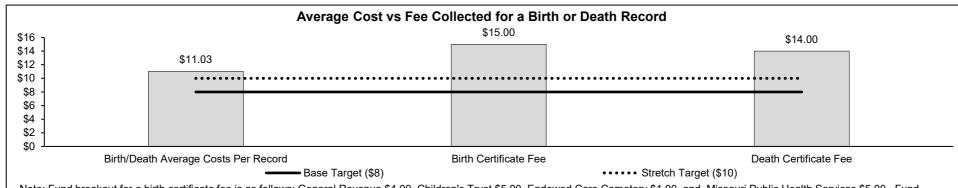
Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality.



Note: Higher wait time were incurred from July to November 2018 due to no additional resources being appropriated to implement HB1599, HB1713, or SB819 along with staffing shortages due to vacancies.

2c. Provide a measure(s) of the program's impact.



Note: Fund breakout for a birth certificate fee is as follows: General Revenue \$4.00, Children's Trust \$5.00, Endowed Care Cemetery \$1.00, and Missouri Public Health Services \$5.00. Fund breakout for a death certificate fee is as follows: General Revenue \$4.00, Children's Trust \$5.00, Endowed Care Cemetery \$1.00, Coroner's Training Fund \$1.00, and Missouri Public Health Services \$3.00.

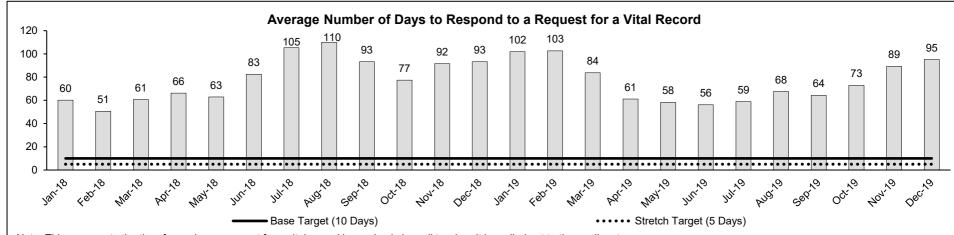
Health and Senior Services

HB Section(s): 10.700

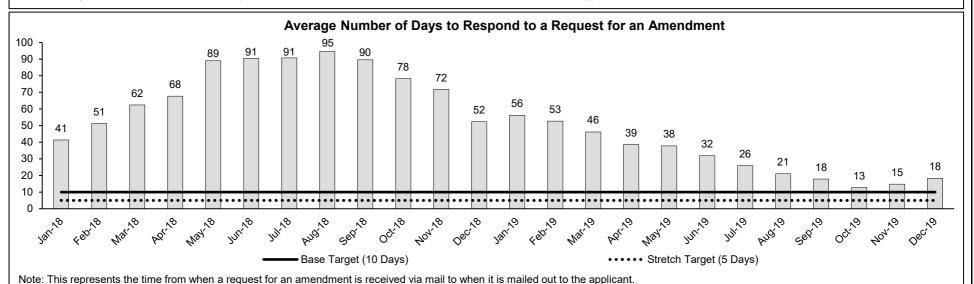
Vital Records

Program is found in the following core budget(s):

d. Provide a measure(s) of the program's efficiency.

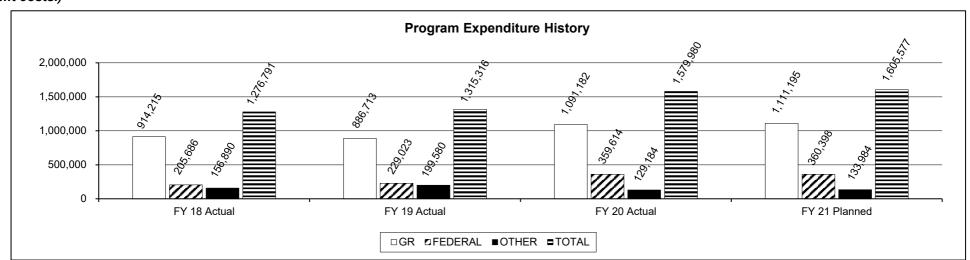


Note: This represents the time from when a request for a vital record is received via mail to when it is mailed out to the applicant.



Health and Senior Services	HB Section(s): 10.700
Vital Records	
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other" funds?

Health Initiatives (0275); Missouri Public Health Services (0298); and Putative Father Registry (0780).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

State: Sections 58.451, 58.455, 58.720, 188.047-055, 192.016, 192.025, 192.060, 192.067, 192.068, 192.323, 193.005-325, 453.100, and 453.170, RSMo. Federal: 42 USC Section 652(a)(7).

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

No.

CORE DECISION ITEM

Health and Senior Services Community and Public Health Core - Aid to Local Public Health Agencies (Core Functions)					Budget Unit 58230C HB Section 10.705					
FY 20	022 Budget Requ	ıest			FY 2022 Gov	ernor's Recomr	nendation			
	GR	Federal	Other	Total		GR	Fed	Other	Total	
PS	0	0	0	0	PS	0	0	0	0	
EE	2,306	0	0	2,306	EE	0	0	0	0	
PSD	3,570,386	9,900,000	0	13,470,386	PSD	0	0	0	0	
TRF	0	0	0	0	TRF	0	0	0	0	
Total	3,572,692	9,900,000	0	13,472,692	Total	0	0	0	0	
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00	
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0	
Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.					_	budgeted in Hous OT, Highway Pat	•	_	es budgeted	

2. CORE DESCRIPTION

The requested core funding is an investment in the 114 local public health agencies throughout Missouri and is essential to protecting the public's health. The local public health agencies are crucial partners with the state in providing public health services. This investment supports the delivery of services critical to the prevention of disease and the promotion of healthy families, lifestyles, and environments through an integrated and cooperative public health system. Monitoring disease incidence and responding to disease outbreaks (e.g., Hepatitis A, HIV, foodborne E-coli, and salmonella) is a primary responsibility. The public health system is vital in responding to public health emergencies and natural disasters by assuring safe food and water, identifying specific health needs within local communities, and mobilizing resources to address the needs.

Challenges are increasing daily due to global travel that brings new and unknown diseases to our doorstep. Newly emerging and re-emerging diseases such as Ebola and Zika viruses, pandemic virus strains, and Avian Influenza, as well as the resurgence of old ones (e.g., measles and whooping cough) and drug resistant diseases (e.g., tuberculosis) place new demands on the public health system to assure that such diseases or agents are recognized early and measures are taken to protect and promote the public's health and safety. The public health system is further challenged by chronic diseases such as diabetes, heart disease, and risk factors including obesity and tobacco use. Reducing the burden of these diseases and risk factors improves the quality of life and decreases health care costs for Missourians.

CORE DECISION ITEM

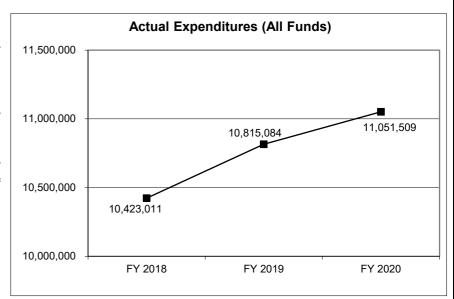
Health and Senior Services	Budget Unit	58230C
Community and Public Health		
Core - Aid to Local Public Health Agencies (Core Functions)	HB Section	10.705

3. PROGRAM LISTING (list programs included in this core funding)

Local Public Health Services

4. FINANCIAL HISTORY

_	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	13,222,692	13,222,692	13,472,692	13,472,692
Less Reverted (All Funds) Less Restricted (All Funds)*	(99,681)	(99,681)	(107,181)	(107,168) (428)
Budget Authority (All Funds)	13,123,011	13,123,011	13,365,511	13,365,096
Actual Expenditures (All Funds) Unexpended (All Funds)	10,423,011 2,700,000	10,815,084 2,307,927	11,051,509 2,314,002	N/A N/A
Unexpended, by Fund:				
General Revenue Federal	0 2,700,000	7,927 2,300,000	7,471 2,306,531	N/A N/A
Other	0	0	0	N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

^{*}Current Year restricted amount is as of 7/01/2020.

DEPARTMENT OF HEALTH & SENIOR SERVINGORE PUBLIC HLTH FUNCTIONS

						SORE	солевнова весоммение о
	13,472,692	0	000'006'6	3,572,692	00.0	IstoT	
	13,470,386	0	000'006'6	3,570,386	00.0	DD	
	2,306	0	0	2,306	00.0	33	
							ТЕВРАВТМЕИТ СОВЕ REQUEST
	13,472,692	0	000'006'6	3,572,692	00.0	Total	
	386,074,61	0	000'006'6	986,078,6	00.0	DD	
	2,306	0	0	2,306	00.0	33	
							CACTER AFTER VETOES
aplanation =	I lstoT	Other	Federal	В	3T7	Budget Class	
						ור	5. CORE RECONCILIATION DETAI

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Total

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EX 2022

EX 2022

FY 2021

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00.0	0	00.0	269,274,81	00.0	269,274,E1	00.0	11,051,510	JATOT
00.0	0	00.0	986,074,61	00.0	98E,074,E1	00.0	11,045,702	G9 - JATOT
00.0	0	00.0	000'006'6	00.0	000'006'6	00.0	697,593,469	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	3,570,386	00.0	3,570,386	00.0	3,452,233	PROGRAM-SPECIFIC GENERAL REVENUE
00.0	0	00.0	2,306	00.0	2,306	00.0	808'9	33 - JATOT
00.0	0	00.0	2,306	00.0	2,306	00.0	808,3	EXPENSE & EQUIPMENT GENERAL REVENUE
								СОВЕ
								CORE PUBLIC HLTH FUNCTIONS
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	ЭТЭ	ВОГГАВ	ETE	DOLLAR	punℲ
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FY 2021

EX 2020

FY 2020

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Decision Item

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00.0	0\$	00.0	269'ZTÞ,£I\$	00.0	\$43,472,692	00.0	019'190'11\$	датот пояяэ
00.0	0	00.0	98£,07 4 ,£1	00.0	13,470,386	00.0	11,045,702	Qq - JATOT
00.0	0	00.0	986,074,61	00.0	986,074,61	00.0	207,840,11	PROGRAM DISTRIBUTIONS
00.0	0	00.0	2,306	00.0	2,306	00.0	808'9	33 - JATOT
00.0	0	00.0	844,1	00.0	844,1	00.0	987	THER EQUIPMENT
00.0	0	00.0	0	00.0	0	00.0	762	PROFESSIONAL SERVICES
00.0	0	00.0	0	00.0	0	00.0	729	COMMUNICATION SERV & SUPP
00.0	0	00.0	136	00.0	139	00.0	049	PROFESSIONAL DEVELOPMENT
00.0	0	00.0	011	00.0	011	00.0	767'7	SUPPLIES
00.0	0	00.0	609	00.0	609	00.0	981,1	TRAVEL, IN-STATE
								COKE
								CORE PUBLIC HLTH FUNCTIONS
СОГЛШИ	СОГЛШИ	ЭТЭ	DOLLAR	ЭТЯ	DOLLAR	3T4	DOLLAR	Budget Object Class

BUDGET

FY 2021

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BUDGET

FY 2021

DEPT REQ

EX 2022

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Decision Item

Health and Senior Services

HB Section(s): 10.700, 10.705, 10.710

Local Public Health Services

Program is found in the following core budget(s):

	DCPH Program Operations	Aid to LPHA	DCPH Programs and Contracts		TOTAL
GR	224,818	3,572,692	0		3,797,510
FEDERAL	68,463	7,600,000	1,159,387		8,827,850
OTHER	14,753	0	0		14,753
TOTAL	308,034	11,172,692	1,159,387		12,640,113

1a. What strategic priority does this program address?

Reduce opioid misuse, Improve the health and safety of Missourians most in need, and Enhance access to care.

1b. What does this program do?

The Department of Health and Senior Services (DHSS), Center for Local Public Health administers participation agreements with 114 local health agencies to ensure public health services are available in every county and city in Missouri. The presence of public health services at the local level is essential for protecting health and keeping people safe. The local health agencies are a key partner in providing statewide services including, but not limited to, communicable disease surveillance and outbreak response, environmental surveillance (retail food, lodging, on-site sewage, childcare sanitation), immunizations, infectious disease testing and referral to care, chronic disease prevention and control education, public health emergency preparedness and response, and vital record issuance. The local health agencies have also been solely responsible for numerous areas of COVID-19 response, including but are not limited to, enforcement of statewide and local orders, case investigation, and contact tracing.

The funding administered through the participation agreements are not mandated for specific activities, but rather allow local health agencies to utilize funding as needed within their own budget to deliver public health services in cooperation with DHSS. While DHSS is available for technical assistance and may lead activities in some program areas, public health services statewide would not be available without the existence of local public health agencies. State funding constitutes a different percentage of each local health department's total budget, but overall, public health in Missouri remains underfunded and funding is necessary to maintain local delivery of these services. The Trust for America's Health publishes information on states' investment in public health and found that Missouri ranks last in the nation (51/51 including the District of Columbia) in state funding for public health at \$5.74 per capita.*

The federal funding (70 percent of the total in FY 2021) distributed through these core participation agreements is the result of federal match received on expenditures reported by locals for specific unreimbursed services they have delivered to children age 0 through 19 (Children's Health Insurance Program Health Services Initiative (CHIP H.S.I.)). DHSS staff provide technical assistance regarding CHIP H.S.I. claiming, and collect and aggregate the expenditure data for all 114 agencies for quarterly submission to the Center for Medicare and Medicaid Services (through collaboration with Department of Social Services) in order to receive this match.

Besides funding support, the Center for Local Public Health staff provide a collaborative approach to quality services by holding orientations and trainings for new administrators and boards of health, connecting locals with staff throughout DHSS for specific programmatic technical assistance, and connecting locals with resources and programs through statewide and regional meetings offered throughout the year.

^{*}Ready or Not? 2017 https://www.tfah.org/wp-content/uploads/archive/assets/files/TFAH-2017-ReadyOrNot-Fnl.pdf.

²⁰¹⁷ is the latest data provided by Trust for America's Heath that is broken down per capita. Missouri has not made significant increases in state health funding, therefore it is assumed that the ranking is still accurate.

Health and Senior Services	HB Section(s): 10.700, 10.705, 10.710
Local Public Health Services	<u></u>

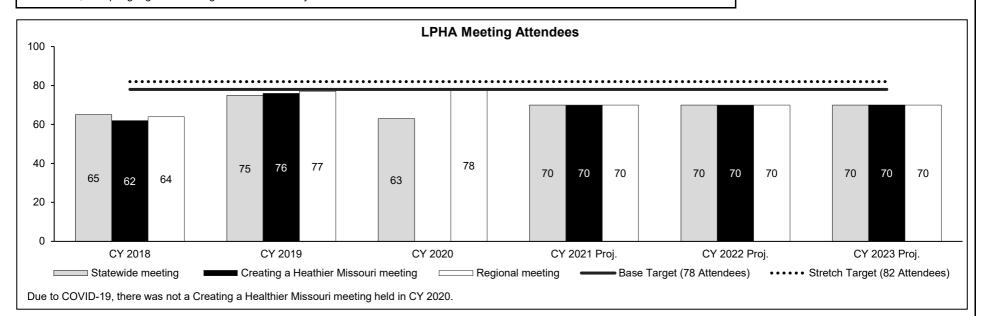
Program is found in the following core budget(s):

2a. Provide an activity measure(s) for the program.

LPHAs Served by the Center for Local Public Health Services										
	FY 2018	FY 2019	FY 2020 Proj.	FY 2021 Proj.	FY 2022 Proj.	FY 2023 Proj.				
LPHAs with CORE Participation Agreements	115	114*	114	114	114	114				
LPHAs receiving individualized training/technical assistance**	19	25	25	29	30	31				
Statewide and/or Regional Public Health Meetings Offered***	3	3	3	3	3	3				

^{*}Independence closure 6/30/18 reduced the number of LPHAs to 114 starting FY 2019.

^{***}Statewide meetings are hosted in Jefferson City. Regional meetings consist of the same agenda offered at six locations throughout the state. Due to COVID-19, the spring regional meetings were held virtually.

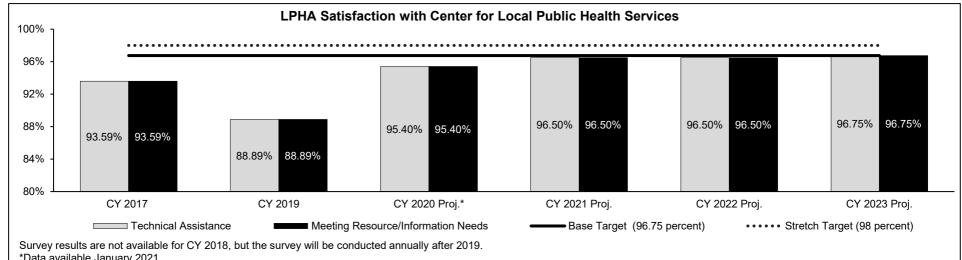


^{**}LPHA's receive training/technical assistance regarding CHIP H.S.I claiming and new administrators, as well as, local boards of health orientation. Due to COVID-19, LPHAs were not as available for trainings as they have been in years prior.

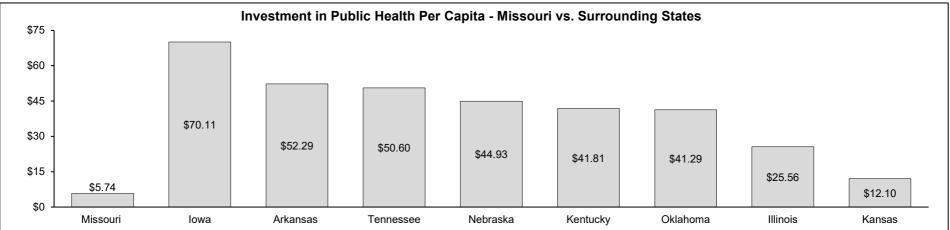
HB Section(s): 10.700, 10.705, 10.710 **Health and Senior Services Local Public Health Services**

Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality.



*Data available January 2021.



2017 is the latest data provided by Trust for America's Heath that is broken down per capita. Missouri has not made significant increases in health, therefore it is assumed this data is still an accurate comparison. For Missouri to achieve a rank of 40th in per capita public health spending, funding would need to increase to \$18.81 per capita. Source: Ready or Not 2017 https://www.tfah.org/wp-content/uploads/archive/assets/files/TFAH-2017-ReadyOrNot-Fnl.pdf.

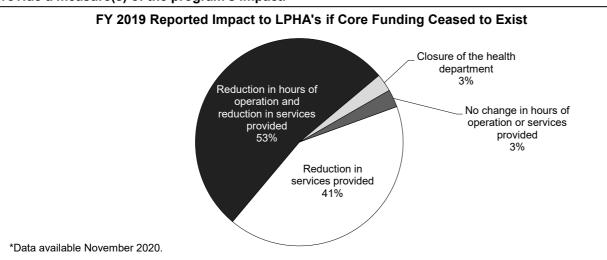
Health and Senior Services

HB Section(s): 10.700, 10.705, 10.710

Local Public Health Services

Program is found in the following core budget(s):

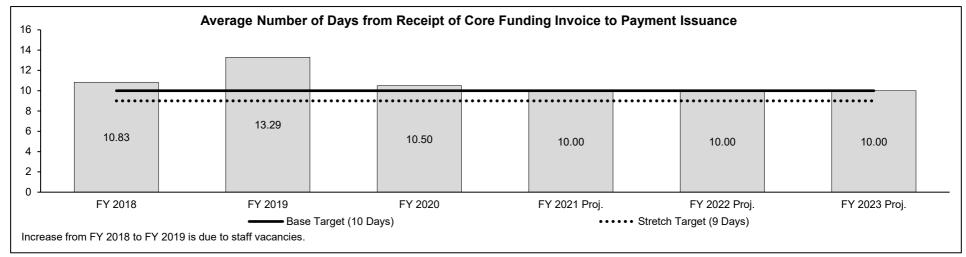
2c. Provide a measure(s) of the program's impact.



Total Public Health Revenue of LPHA Derived						
from CORE Parti	cipation Fun	ding				
Population of Jurisdiction	Number of	Average %				
	icipation Fundir	of Total				
< 6,000	7	15.94%				
6,001 - 10,000	16	12.10%				
10,000 - 25,000	43	10.02%				
25,001 - 50,000	24	8.18%				
50,001 - 150,000	16	7.64%				
>150,000	8	4.64%				

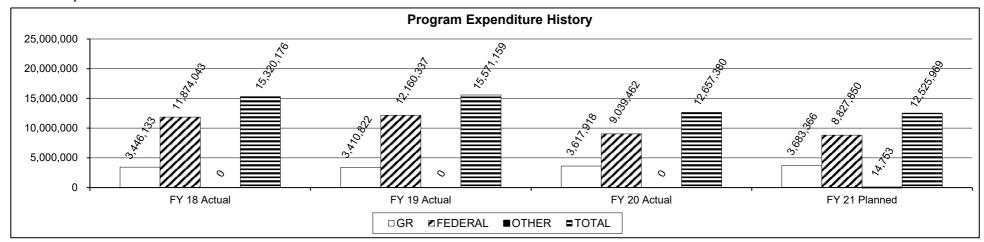
Source: 2018 LPHA Financial Report. The 2020 LPHA Financial Report will be available March 2021.

2d. Provide a measure(s) of the program's efficiency.



Health and Senior Services	HB Section(s): 10.700, 10.705, 10.710
Local Public Health Services	<u></u>
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Health Initiatives (0275).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 167.181, 191.668, 191.677, 192.020, 192.031, 192.072, 192.080, 192.090, 192.110, 192.510, 196.030, 196.045, 196.055, 196.240, 196.866, 196.951,199.170-270, 199.350, 210.003, 210.050, 315.007, 322.140, 701.033, 701.326, 701.328, 701.336, and 701.343, RSMo (Disease Surveillance, Communicable Disease Prevention, Immunization, Environmental Public Health and Safety, Childhood Lead Poisoning Prevention).

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

No.

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58420C, 58425C, 58445C, 58570C,
Community and Public Health		58580C, 58585C, 58620C
Core - Division of Community and Public Health Programs and Contracts	HB Section	10.710, 10.715
•		

CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 2022	Governor's F	Recommendat	ion	
	GR	Federal	Other	Total		GR	Fed	Other	Total	
PS	0	0	0	0	PS	0	0	0	0	
EE	1,878,379	5,422,958	225,581	7,526,918	EE	0	0	0	0	
PSD	7,019,666	101,578,177	2,440,069	111,037,912	PSD	0	0	0	0	
TRF	0	0	0	0	TRF	0	0	0	0	
Total	8,898,045	107,001,135	2,665,650	118,564,830	Total	0	0	0	0	
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00	
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0	
Note: Fringes bu	Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted				Note: Fringes	Note: Fringes budgeted in House Bill 5 except for certain fringes				

directly to MoDOT, Highway Patrol, and Conservation.

budgeted directly to MoDOT, Highway Patrol, and Conservation.

Federal Funds: Department of Health and Senior Services Federal (0143) and Department of Health and Senior Services Federal Stimulus (2350).

Other Funds: Missouri Public Health Services (0298), Department of Health and Senior Services - Donated (0658), Brain Injury (0742), Organ Donor Program (0824), C&M Smith Memorial Endowment (0873), Missouri Lead Abatement Loan (0893), and Children's Special Health Care Needs Service (0950).

2. CORE DESCRIPTION

The Division of Community and Public Health contracts with local public health agencies and other providers to deliver important public health services. Core funding is requested for public health activities relating to environmental health and communicable diseases, including services for individuals with human immunodeficiency virus and acquired immune deficiency syndrome (medications, case management, and housing); infectious disease prevention and surveillance (novel coronavirus, viral hepatitis, sexually transmitted diseases, human immunodeficiency virus, West Nile, Zika, tick-borne diseases, tuberculosis, measles, and other reportable communicable diseases); lead screening; health education; inspections for child care sanitation; on-site sewage issues; lodging inspections; and food safety activities, including food recalls.

This funding also supports the following initiatives: chronic disease prevention and health promotion; genetic screening, diagnostic evaluations, counseling, and treatment services; breastfeeding education; nutrition education; obesity prevention; breast and cervical cancer and heart disease screening; Missouri Cancer Registry; tobacco prevention and control; organ donation; service coordination and rehabilitation for adults with brain injury; injury prevention; maternal and child health services including home visiting; service coordination and treatment for children with special health care needs; education and support for the child forensic exam provider network; sudden infant death syndrome autopsy payments; data collection and analysis to drive opioid misuse prevention and response activities; adolescent health and abstinence-only education; immunizations; radiological and hazardous material emergency response; and related surveillance systems.

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58420C, 58425C, 58445C, 58570C,	
Community and Public Health		58580C, 58585C, 58620C	_
Core - Division of Community and Public Health Programs and Contracts	HB Section	10.710, 10.715	

3. PROGRAM LISTING (list programs included in this core funding)

All programs in the Division of Community and Public Health except:

Extended Women's Health Services

Local Public Health Services Core Funding

Nutrition Services

Office of Dental Health

Office of Minority Health

Office of Rural Health and Primary Care

Public Health/Healthcare Emergency Preparedness and Response Coordination

State Public Health Laboratory

Vital Records

Women's Health Initiatives

Show-Me Healthy Women and WISEWOMAN

4. FINANCIAL HISTORY

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
l				
Appropriation (All Funds)	97,882,473	98,219,696	106,557,316	118,564,830
Less Reverted (All Funds)	(124,455)	(145,041)	(147,940)	(126,301)
Less Restricted (All Funds)*	0	0	(75,000)	(382,421)
Budget Authority (All Funds)	97,758,018	98,074,655	106,334,376	118,056,108
Actual Expenditures (All Funds)	85,408,063	85,592,489	97,993,245	N/A
Unexpended (All Funds)	12,349,955	12,482,166	8,341,131	N/A
Unexpended, by Fund:				
General Revenue	12,745	272,307	482,157	N/A
Federal	11,841,516	11,457,653	7,174,600	N/A
Other	495,694	752,206	684,374	N/A

Actual Expenditures (All Funds)

120,000,000

100,000,000

85,408,063

80,000,000

FY 2018

FY 2019

FY 2020

Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: In FY 2021, Show-Me Healthy Women and WISEWOMAN were reallocated into the Section for Women's Health.

^{*}Current Year restricted amount is as of 7/01/2020.

DIV COMM & PUBLIC HLTH PROGRAMS

	41,080,840	0	888,878,88	2,204,502	00.0	Total		
	36,250,696	0	976,639,68	716,670,2	00.0	 bD		
	2°048°144	0	4,922,959	125,185	00.0	33		
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	36,032,696	0	676,639,65	716,670,2	00.0			
	2°048°144	0	4,922,959	125,185	00.0	33		
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Internal reallocations based on	(1,614,209)	0	(1,614,209)	0	00.0	ЬD	233 1256	Core Reallocation
planned expenditures.								
Internal reallocations based on	(004,81)	0	0	(13,400)	00.0	ЬD	233 1222	Core Reallocation
planned expenditures.	((((
Internal reallocations based on	1,614,209	0	1,614,209	0	00.0	33	233 1226	Core Reallocation
planned expenditures.		_						
Internal reallocations based on	13,400	0	0	13,400	00.0	33	733 1722	Core Reallocation
						STN	AMTSULGA 3	DEPARTMENT COR
	41,080,840	0	866,378,86	2,204,502	00.0	Total		
	37,660,305	0	35,567,588	717,260,2	00.0	BD		
	3,420,535	0	3,308,750	987,111	00.0	33		
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		00.0	979'908'7	138,285,79		<u> </u>	766,889,17	
DEPARTMENT CORE REQUEST								
	IstoT	00.0	979'908'7	138,285,79		4 0	۲ 6 £,886,۱۲	
	DD	00.0	979'908'7	138,285,79		<u> </u>	766,889,17	
TAFP AFTER VETOES								
	Budget Class	3T4	ЯЭ	Federal	Other		lstoT	Explanation
5. CORE RECONCILIATION DETAI	יור							

CHILD W/SPECIAL HLTH NEEDS

5. CORE RECONCILIATION DETAIL

	Total	00.0	006'996	0	000'0⊅	006'900'l	
	DD	00.0	313,960	0	0	313,960	
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	Total	00.0	006'996	0	000'07	006'900'l	
	DD	00.0	313,960	0	0	313,960	
	33	00.0	046,239	0	000'0†	046,269	
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NET DEPARTMENT (CHANGES	00.0	0	0	0	0	
							planned expenditures.
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							planned expenditures.
Core Reallocation 244 9419	33 6	00.0	 クレレ ・	0	0		Internal reallocations based on
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	33	00.0	928,806	0	000,04	978,826	
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BRAIN INJURY SERVICES

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planned expenditures.	,							
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planned expenditures.		_						
Internal reallocations based on	096,29	0	0	096'79	00.0	33	253 0262	Core Reallocation
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	ا'609'388	184,581	900,000	708,4 <u>5</u> 29	00.0	33		
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Explanation	Total	Other	Federal	ЯЭ	3T7	Budget Class		
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	112,486	0	0	112,486	00.0	33	
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	9 1 9,877,1	094'6 7 9'l	0	153,896	00.0	DD	
	112,486	0	0	112,486	00.0	33	
							ТЕЗИВЕНТ СОВЕ ВЕДИЕЗТ
	1,886,132	094'6 7 9'l	0	236,382	00.0	Total	
	949,877,1	09Z'6 7 9'l	0	153,896	00.0	DD	
	112,486	0	0	112,486	00.0	33	
							TAFP AFTER VETOES
xplanation	∃ lstoT	Other	Federal	ВЭ	3T4	Budget Class	
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DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

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00.0	0	00.0	724,981	00.0	786,422	00.0	0	DHSS FEDERAL STIMULUS
00.0	0	00.0	33,728,398	00.0	35,342,607	00.0	24,463,305	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	716,970,2	00.0	717,290,2	00.0	2,163,978	GENEKAN-SPECIFIC
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00.0	0	00.0	4,872,959	00.0	3,258,750	00.0	3,545,463	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	126,185	00.0	987,111	00.0	100,185	EXPENSE & EQUIPMENT GENERAL REVENUE
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BUDGET

FY 2021

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EX 2020

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EX 2020

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Budget Object Summary

Decision Item

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LEAD ABATEMENT LOAN PRGM								
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DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

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JATOT	799,289,59	00.0	768,888,17	00.0	768,888,17	00.0	0	00.0
G9 - JATOT	799,289,69	00.0		00.0	766,889,17	00.0	0	00.0
DHSS FEDERAL STIMULUS	0	00.0	401,508	00.0	401,508	00.0	0	00.0
DHSS-FEDERAL AND OTHER FUNDS	121,775,93	0.00	£4£,186,88	00.0	£4£,186,88	00.0	0	00.0
GENERAL REVENUE	4,305,546	00.0	4,305,546	00.0	4'302'246	00.0	0	00.0
PROGRAM-SPECIFIC								
СОВЕ								
MEDICATIONS PROGRAMS								
punℲ	DOLLAR	ЭТЭ	DOLLAR	3T4	DOLLAR	ЭТЭ	СОГЛШИ	СОГЛШИ

BUDGET

FY 2021

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FY 2020

Budget Object Summary

Decision Item

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DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

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00.0	0	00.0	313,960	00.0	470,188	00.0	304,542	GENEKAL REVENUE PROGRAM-SPECIFIC
00.0	0	00.0	695,940	00.0	978,346	00.0	0 7 2,340	33 - JATOT
00.0	0	00.0	30,000	00.0	30,000	00.0	886,62	CHILD SPECIAL HLTH CARE NEEDS
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								СОВЕ
								CHILD W/SPECIAL HLTH NEEDS
СОГЛШИ	СОГЛШИ	ЭТЯ	DOLLAR	3T7	ВОГГАВ	3T4	DOLLAR	punℲ

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Budget Object Summary

Decision Item

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EX 2022

DEPT REQ

EX 2022

BUDGET

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00.0	0	00.0	Z76'97l	00.0	706,907	00.0	116,041	GENEKAL REVENUE PROGRAM-SPECIFIC
00.0	0	0.00	1,672,348	00.0	88£,609,1	00.0	692'979	33 - JATOT
00.0	0	00.0	184,581	00.0	184,581	00.0	0	BRAIN ועזטרץ רטמם
00.0	0	00.0	200,000	00.0	200'000	00.0	909	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	797,786	00.0	708,429	00.0	625,763	EXPENSE & EQUIPMENT GENERAL REVENUE
								СОКЕ
								ВКАІИ ІИЈИКУ ЅЕRVICES
СОГЛШИ	СОГЛШИ	3T4	DOLLAR	3T4	ВОГГАВ	3T4	DOLLAR	pun-i

BUDGET

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Budget Object Summary

Decision Item

EX 2022

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00.0	0	00.0	123,896	00.0	123,896	00.0	121,826	PROGRAM-SPECIFIC GENERAL REVENUE
00.0	0	00.0	112,486	00.0	112,486	00.0	99 1 ,701	33 - JATOT
00.0	0	00.0	112,486	00.0	984,211	00.0	994,701	EXPENSE & EQUIPMENT GENERAL REVENUE
								COKE
								GENETICS PROGRAM
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	ЭТЯ	DOLLAR	pun∃
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								TOBACCO CESSATION
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00.0	0\$	00.0	0 1 8'080'1 1 \$	00.0	0 1 8'080'1 1 \$	00.0	186,272,08\$	GRAND TOTAL
00.0	0	00.0	369'720'98	00.0	306,030,75	00.0	26,527,283	Qq - JATOT
00.0	0	00.0	369,250,696	00.0	306,030,78	00.0	26,527,283	PROGRAM DISTRIBUTIONS
00.0	0	00.0	£,048,144	00.0	3,420,535	00.0	3,645,648	33 - JATOT
00.0	0	00.0	0	00.0	719,2	00.0	0	WISCELLANEOUS EXPENSES
00.0	0	00.0	162,1	00.0	843	00.0	186	EQUIPMENT RENTALS & LEASES
00.0	0	00.0	12,150	00.0	1,362	00.0	097,8	BUILDING LEASE PAYMENTS
00.0	0	00.0	0	00.0	820	00.0	0	OTHER EQUIPMENT
00.0	0	00.0	961,7	00.0	078,8	00.0	881,5	M&R SERVICES
00.0	0	00.0	116,848,811	00.0	7,536,434	00.0	2,623,439	PROFESSIONAL SERVICES
00.0	0	00.0	439	00.0	0	00.0	452	COMMUNICATION SERV & SUPP
00.0	0	00.0	326,325	00.0	₽ 67,027	00.0	73,590	PROFESSIONAL DEVELOPMENT
00.0	0	00.0	J,344,526	00.0	841,441	00.0	982,354	SUPPLIES
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								COKE
								DIV COMM & PUBLIC HLTH PROGRAMS
СОГЛШИ	СОГЛШИ	317	DOLLAR	317	DOLLAR	317	DOLLAR	Budget Object Class

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								СОКЕ
								LEAD ABATEMENT LOAN PRGM
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	Budget Object Class
SECURED	SECNKED	рерт кед	рерт кед	BUDGET	BUDGET	AUTOA	AUTOA	Decision Item
*******	*******	FY 2022	FY 2022	FY 2021	FY 2021	EA 2020	FY 2020	Budget Unit

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FEDERAL FUNDS

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00.0 00.0 00.0 00.0		00.0 00.0 00.0	943,305,44 138,285,78 0\$	00.0 00.0 00.0	0\$ 198'38£'29\$ 979'90£'7	00.0 00.0 00.0	0\$ \Z\'4\E'69\$ 979'90E'7\$	GENERAL REVENUE FEDERAL FUNDS SOTHER FUNDS
00.0	0\$	00.0	466,889,17	00.0	46 £,889,17\$	00.0	799,289,59\$	JATOT GNAЯĐ
00.0	0	00.0	766,889,17	00.0	7 6 £,886,17	00.0	799,289,59	Q9 - JATOT
00.0	0	00.0	766,886,17	00.0	766,889,17	00.0	799,289,59	PROGRAM DISTRIBUTIONS
								СОВЕ
								MEDICATIONS PROGRAMS
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	ЭТЯ	DOLLAR	Budget Object Class
SECURED	SECNEED	рерт кед	рерт кед	BUDGET	BUDGET	AUTDA	AUTOA	Decision Item
*******	******	FY 2022	FY 2022	FY 2021	FY 2021	L A 5050	FY 2020	Budget Unit

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	GENERAL REVENUE FEDERAL FUNDS	0\$ 1 68'486\$	00.0 00.0	0\$ 006'996\$	00.0 00.0	0\$ 006'996\$	00.0 00.0		00.0 00.0
ЛАТОТ ДИАЯ Ð		Z88'9 ∠ 6\$	00.0	006'900' \ \$	00.0	006'900'≀\$	00.0	0\$	00.0
Q9 - JATOT		304,542	00.0	\$40,1 5 £	00.0	096'818	00.0	0	00.0
UBIATSID MAADOA9	- SNOITU	304,542	00.0	470,18E	00.0	913,960	00.0	0	00.0
33 - JATOT		672,340	00.0	978'979	00.0	046,269	00.0	0	00.0
OTHER EQUIPMENT	_	948,81	00.0	662,62	00.0	824,61	00.0	0	00.0
PROFESSIONAL SER/	SAICES	048'694	0.00	287,412	00.0	968'881	00.0	0	00.0
SUPPLIES		183,655	0.00	102,242	0.00	719,481	00.0	0	00.0
СОКЕ									
CHILD W/SPECIAL HLTH N	NEEDS								
Budget Object Class	•	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	3T7	СОГЛШИ	СОГЛШИ
Decision Item		AUTDA	AUTDA	BUDGET	BUDGET	рерт кед	рерт кед	SECNBED	SECURED
Budget Unit		EA 2020	LA 2020	FY 2021	FY 2021	FY 2022	FY 2022	******	*****

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OTHER FUNDS

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DECISION ITEM DETAIL

JATOT GNAS	\$1,298,625	00.0	195,108,2\$	00.0	195,108,2\$	00.0	0\$	00.0
Q9 - JATOT	992,279	00.0	£71,291,1	00.0	1,129,213	00.0	0	00.0
PROGRAM DISTRIBUTIONS	998,279	00.0	1,192,173	00.0	1,129,213	00.0	0	00.0
33 - JATOT	692,626	00.0	88£,609,1	00.0	8 1 °E,278,1	00.0	0	00.0
PROFESSIONAL SERVICES	995,556	00.0	886,609,1	00.0	1,672,348	00.0	0	00.0
COMMUNICATION SERV & SUPP	306	0.00	0	00.0	0	00.0	0	00.0
SUPPLIES	526	0.00	0	00.0	0	00.0	0	00.0
TRAVEL, IN-STATE	271	0.00	0	00.0	0	00.0	0	00.0
COKE								
ВРАІИ ІИЈИКУ ЅЕRVICES								
Budget Object Class	DOLLAR	3T7	DOLLAR	3T7	ВОГГАК	3T7	СОГЛШИ	СОГЛШИ
Decision Item	JAUTOA	JAUTDA	BUDGET	BUDGET	DEPT REQ	DEPT REQ	SECURED	2ECNKED
Budget Unit	FY 2020	E A 5050	FY 2021	FY 2021	FY 2022	FY 2022	******	******

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OTHER FUNDS

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DECISION ITEM DETAIL

00.0 00.0		00.0 00.0	0\$ 786,862\$	00.0 00.0	0\$ 786,852\$	00.0 00.0	0\$ 162'62Z\$	GENERAL REVENUE FEDERAL FUNDS
00.0	0\$	00.0	Z£1,888,13	00.0	Z£1,888,1\$	00.0	\$9°904°1\$	GRAND TOTAL
00.0	0	00.0	9 1 9'£77,1	00.0	9 1 9'£77'l	00.0	1,598,189	Qq - JATOT
00.0	0	00.0	9 1 9'877'1	00.0	949,677,1	00.0	681,893,1	PROGRAM DISTRIBUTIONS
00.0	0	00.0	112,486	00.0	112,486	00.0	394,701	33 - JATOT
00.0	0	00.0	262,2	00.0	2,292	00.0	061,8	PROFESSIONAL SERVICES
0.00	0	00.0	⊅ 61'011	0.00	₱61,011	00.0	102,275	SUPPLIES
								COKE
								GENETICS PROGRAM
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	3T7	ВОГГАВ	Budget Object Class
SECNKED	SECNBED	рерт кед	рерт вед	BUDGET	BUDGET	AUTOA	AUTDA	Decision Item
*****	******	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit

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DECISION ITEM DETAIL

	GENERAL REVENUE FEDERAL FUNDS STHER FUNDS	242,82 8 242,82 8 0 8	00.0 00.0 00.0	0\$ 000'0S\$ 000'0S\$	00.0 00.0 00.0	0\$ 000'09\$ 000'09\$	00.0 00.0 00.0		00.0 00.0 00.0
ЈАТОТ ПИАЯ Э		787 '99\$	00.0	000'001\$	00.0	000'001\$	00.0	0\$	00.0
Q9 - JATOT		787 ['] 99	00.0	000,001	00.0	000,001	00.0	0	00.0
FUBIATZIO MAAĐOA9	SNO	1 84,84	00.0	000,001	00.0	000,001	00.0	0	00.0
СОКЕ									
TOBACCO CESSATION									
Budget Object Class		DOLLAR	3T7	DOLLAR	ЭТЯ	DOLLAR	3T7	СОГЛШИ	СОГЛШИ
Decision Item		AUTOA	AUTDA	BUDGET	BUDGET	рерт кед	DEPT REQ	SECURED	SECURED
Budget Unit		FY 2020	FY 2020	FY 2021	FY 2021	FY 2022	FY 2022	******	******

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Health and Senior Services	HB Section(s): 10.700, 10.710
Chronic Disease Control	

Program is found in the following core budget(s):

	DCPH Program Operations	DCPH Programs and Contracts	TOTAL
GR	140,663	322,941	463,604
FEDERAL	603,942	3,298,756	3,902,698
OTHER	149,256	0	149,256
TOTAL	893,861	3,621,697	4,515,558

1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need and Enhance access to care.

1b. What does this program do?

The Chronic Disease Control program coordinates initiatives to help Missourians prevent and control chronic diseases through managing blood pressure and cholesterol, promoting health screening and early detection of disease, increasing knowledge of signs and symptoms of heart disease and stroke, reducing health disparities, improving the quality of school health services, and providing quality chronic care management. Chronic disease program services include:

- Assessing the burden of cancer, heart disease, diabetes, asthma, arthritis, and other chronic diseases;
- · Raising awareness of chronic disease through screening and early detection;
- Making referrals to care services for those diagnosed with chronic disease;
- Supporting evidence-based interventions, such as Community Health Workers, which provide for chronic disease self-management;
- Supporting quality improvement initiatives in the healthcare system which improve care services;
- Leveraging the reach of chronic disease programs through collaborations with stakeholders and partnerships; and
- Maintaining the Organ and Tissue Donor Registry to increase the number of people who receive life-saving transplants and education.

Health and Senior Services

Chronic Disease Control

HB Section(s): 10.700, 10.710

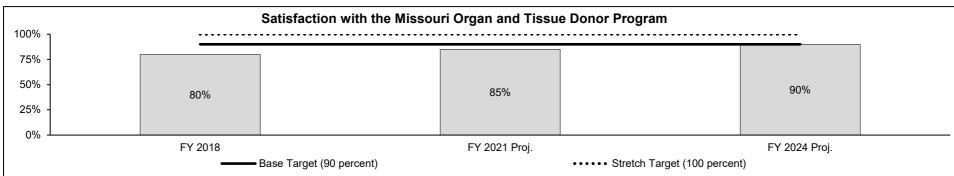
Program is found in the following core budget(s):

2a. Provide an activity measure(s) for the program.

	FY 2018	FY 2019	FY 2020*	FY 2021 Proj.	FY 2022 Proj.	FY 2023 Proj.
Participants in one or more evidence-based arthritis/chronic disease courses	2,782	2,590	*1,599	2,000	2,000	2,000
Patients at Federally Qualified Health Centers who participate in the Chronic Disease Collaborative	73,148	124,954	93,975	130,000	133,000	135,000
Donor Registry enrollees (all ages)	3,771,477	3,888,948	3,982,121	4,091,630	4,204,151	4,319,766
*Data available October 2020.	•		•			

CY 2021 CY 2020 CY 2022 CY 2023 **CY 2018** CY 2019 Proj. Proj. Proj. Proj. Participants enrolled in National Diabetes Prevention 6,308 11,450 13,000 15,000 18,000 20,000 Programs in Missouri Participants in ADA-recognized or AADE-accredited Diabetes Self-Management Education and Support 32,500 20.194 32.500 33.500 34.000 35.000 Services (DSMES) in Missouri

2b. Provide a measure(s) of the program's quality.



Satisfaction with the Organ and Tissue Donor Program includes all surveyed that were somewhat satisfied or completely satisfied with the program as a whole.

Source: Survey of Governor's Organ Donation Advisory Committee and of partners inclusive of organ donation procurement agencies involved in organ and tissue donation throughout Missouri repeated every three years.

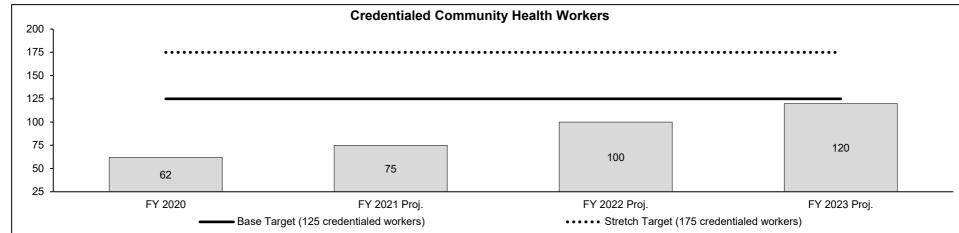
Health and Senior Services

Chronic Disease Control

Program is found in the following core budget(s):

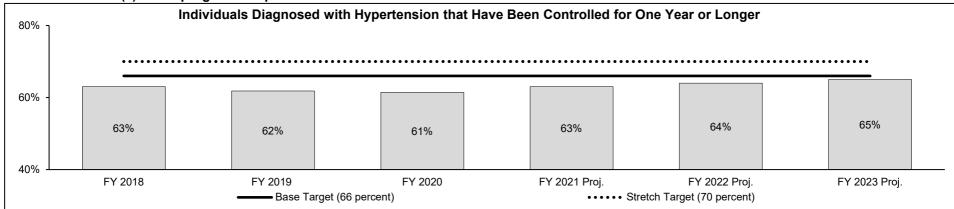
HB Section(s): 10.700, 10.710

2b. Provide a measure(s) of the program's quality. (continued)



Credentialing ensures that Community Health Workers (CHW) have received intensive training in the core competencies required to be a CHW. Credentialed CHW's also have better reimbursement rates and a higher sustainability within the agency they serve. The program provides funding to community colleges around the state to offer credentialing training to CHW's. The program began credentialing December 2019.

2c. Provide a measure(s) of the program's impact.



Healthy People 2020: 61.2 percent target.

This represents adult patients at Federally Qualified Health Centers, that are enrolled in the Chronic Disease Collaborative with DHSS, who have blood pressure at or below recommended thresholds. Patients with controlled hypertension are at lower risk for heart disease, stroke, and complications from diabetes.

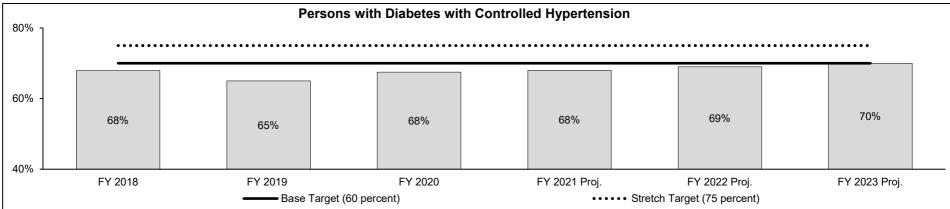
Health and Senior Services

Chronic Disease Control

Program is found in the following core budget(s):

HB Section(s): 10.700, 10.710

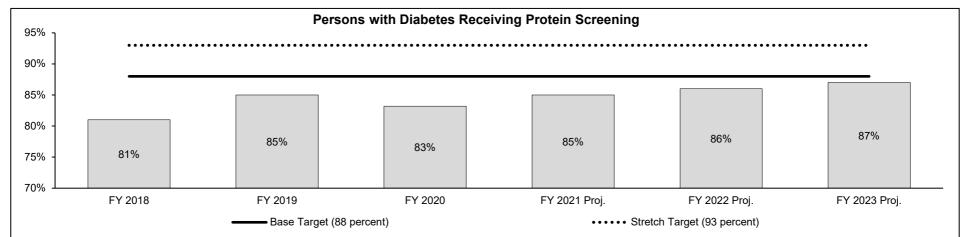
2c. Provide a measure(s) of the program's impact. (continued)



Healthy People 2020: 57 percent target.

This represents adult patients at Federally Qualified Health Centers, that are enrolled in the Chronic Disease Collaborative with DHSS, who are tested annually and have blood pressure at or below recommended thresholds. Persons with diabetes are more likely to develop heart disease and stroke.

2d. Provide a measure(s) of the program's efficiency.



This includes adult patients with diabetes at Federally Qualified Health Centers which are participating in the Chronic Disease Collaborative with DHSS whose protein levels are tested annually and are at or below recommended thresholds. Monitoring kidney health is important for persons with diabetes because of their increased risk of developing chronic kidney disease.

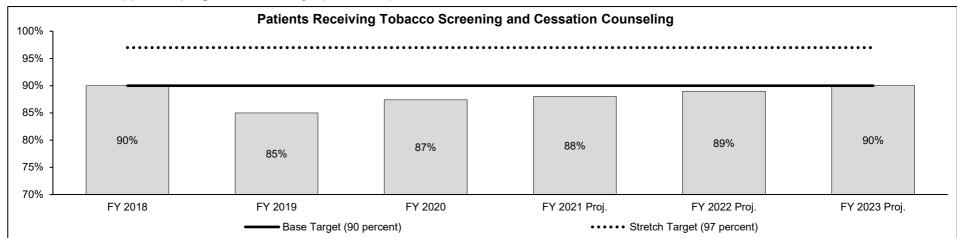
Health and Senior Services

Chronic Disease Control

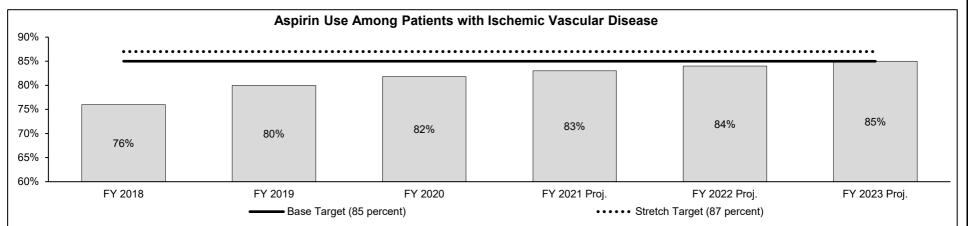
HB Section(s): 10.700, 10.710

Program is found in the following core budget(s):

2d. Provide a measure(s) of the program's efficiency. (continued)



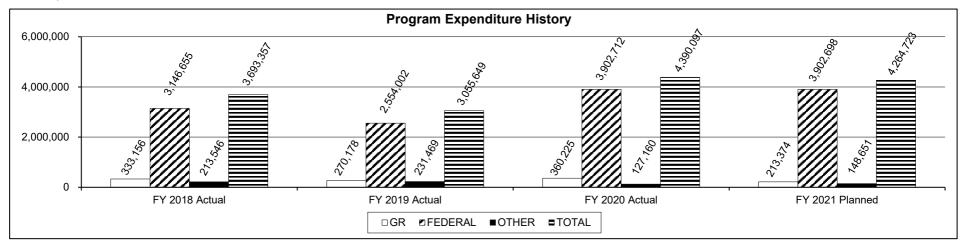
This includes adult patients at Federally Qualified Health Centers, that are participating in the Chronic Disease Collaborative with DHSS, who are screened for tobacco use one or more times in 24 months and who receive cessation intervention if identified as a tobacco user. Tobacco cessation lowers risk for cancer, heart disease, and diabetes.



This represents adult patients with Ischemic Vascular Disease at Federally Qualified Health Centers, that participate in the Chronic Disease Collaborative with DHSS. Aspirin use among patients with ischemic vascular disease can lower risk for heart attack and stroke.

Health and Senior Services	HB Section(s): 10.700, 10.710
Chronic Disease Control	
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Health Initiative (0275); Department of Health and Senior Services - Donated (0658) and Organ Donor Program (0824).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Arthritis and Osteoporosis: Sections 192.700-725, RSMo, Section 301(a) and 317(k)(2) of the Public Health Service Act, [42 U.S.C. Section 241 (a) and 247b(k) (2), as amended]; Asthma: Section 317 (k)(2) and 3171 of the Public Health Service Act, [42 U.S.C. Sections 247b and 247b-10], as amended; Organ and Tissue Donation: Chapter 58 and 194, RSMo, Sections 191.677.1, 301.020.8, 301.3125, 302.171, 302.181, and 431.069, RSMo, National Organ Transplant Act, PL 98-507, Organ Donation and Recovery Improvement Act, PL 108-216; Heart Disease, Stroke and Diabetes: Section 317(k)(2) of the Public Health Service Act (PHS Act), 42 U.S.C. 247b (k)(2); Section 301(a) of the PHS Act, 42 U.S.C. 241(a); Cancer: Sections 192.050, 192.650-657, 208.151, and Chapter 376, RSMo, Public Health Service Act Sections 307 and 317 (k)(1) [42 USC 2421 and 247 b(k)(1)], Cancer Registries Amendment Act, PL 102-515).

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

No.

Health and Senior Services	HB Section(s): 10.700, 10.710, 10.755
Communicable and Vector-borne Disease Control and Prevention	
Program is found in the following core hudget(s):	

	DCPH Program Operations	DCPH Programs and Contracts	Office of Emergency Coordination		TOTAL
GR	850,908	32,399	0		883,307
FEDERAL	2,415,738	2,665,830	313,146		5,394,714
OTHER	112,938	0	0		112,938
TOTAL	3,379,584	2,698,229	313,146		6,390,959

1a. What strategic priority does this program address?

Reduce opioid misuse, Improve the health and safety of Missourians most in need, and Enhance access to care.

1b. What does this program do?

The Communicable and Vector-borne Disease Control and Prevention programs improve the health of Missourians through prevention and control of diseases, which are spread from person to person or from animals to people. These programs provide the following services:

- Investigates more than 90 different communicable diseases and conditions of public health significance in Missouri. The majority of the diseases are mandated for reporting by healthcare providers to DHSS.
- Responds to emerging and reemerging diseases, such as COVID-19, Ebola, multi-drug resistant tuberculosis, acute flaccid myelitis, influenza, hepatitis A, and measles, and to zoonotic diseases, such as Zika virus infection.
- Provides training and technical assistance to local health officials to prevent communicable diseases in their communities and rapidly respond to outbreaks of infectious disease when identified.
- Coordinates with government at all levels, community organizations, hospitals, health care providers, and the media to implement control measures, and educate the public during local, statewide, national, and worldwide outbreaks of communicable diseases.
- Assists with community planning and response for emergencies such as bioterrorism, pandemic influenza, and other pandemics such as COVID-19; and natural
 disasters such as flooding and earthquakes; program staff are also responsible for public health surveillance, disease investigation, and disease-related
 community education associated with these events.

The Immunization Program works to increase immunization participation to protect Missourians against vaccine-preventable diseases based on the recommendations of the Centers for Disease Control and Prevention (CDC). This program provides the following services:

- Provides vaccines to eligible children and adults through the federal entitlement Vaccines for Children (VFC) Program and Public Health Act Section 317 funding.
- Offers education and immunization record assessments for health care professionals to increase coverage rates.
- Maintains a central immunization registry, ShowMeVax, which tracks immunization records and is used to conduct immunization validations required for school and childcare; forecasts need and manages centralized vaccine inventory; and allows providers to order vaccine and track shipments.
- Offers technical assistance to health care providers and the general public regarding vaccine recommendations, safety, schedules, and other general information.
- Focuses on the provision of services to prevent and control influenza outbreaks in vulnerable populations through immunization of VFC/317-eligible populations and is an integral participant in pandemic influenza planning.

Health and Senior Services	HB Section(s): 10.700, 10.710, 10.755
Communicable and Vector-borne Disease Control and Prevention	

Program is found in the following core budget(s):

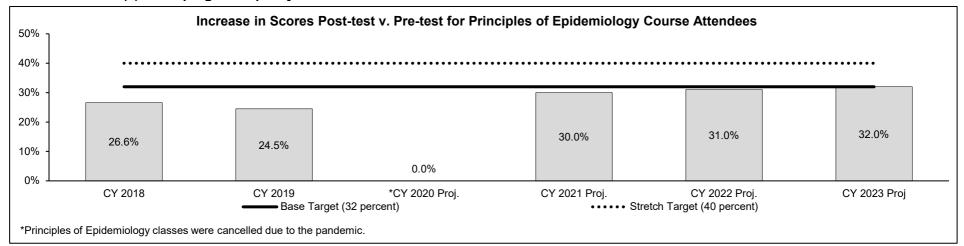
2a. Provide an activity measure(s) for the program.

	CY 2018	CY 2019	CY 2020 Proj.	CY 2021 Proj.	CY 2022 Proj.	CY 2023 Proj.
Conditions reported from healthcare providers to DHSS for surveillance and investigation	85,950	90,248	174,823**	94,760	99,498	104,473
Communicable Disease Outbreaks	105	93	1,100**	100	100	100
Principles of Epidemiology Training Attendees	45	57	0***	50	50	50
DHSS Staff Visits and Technical Assistance to Vaccines for Children Providers	642	642	650	650	650	650
Vaccines Distributed	1,157,040	1,199,291	1,259,256	1,322,218	1,388,329	1,457,746
Animal to Human Disease Consultations Provided	299	299	314	330	346	363

^{**}The large variation in CY 2020 Proj. numbers reflects the unprecedented impact of the COVID-19 pandemic on conditions reported and number of outbreaks.

***Principles of Epidemiology classes were cancelled due to the pandemic.

2b. Provide a measure(s) of the program's quality.



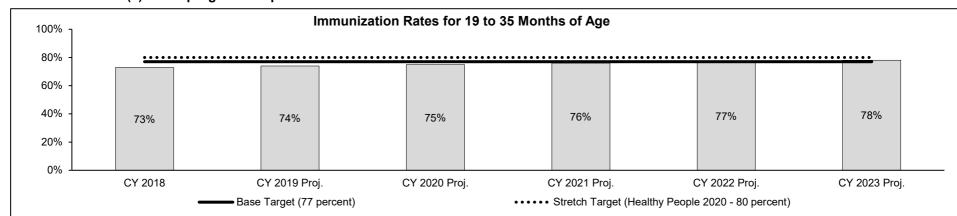
Health and Senior Services

HB Section(s): 10.700, 10.710, 10.755

Communicable and Vector-borne Disease Control and Prevention

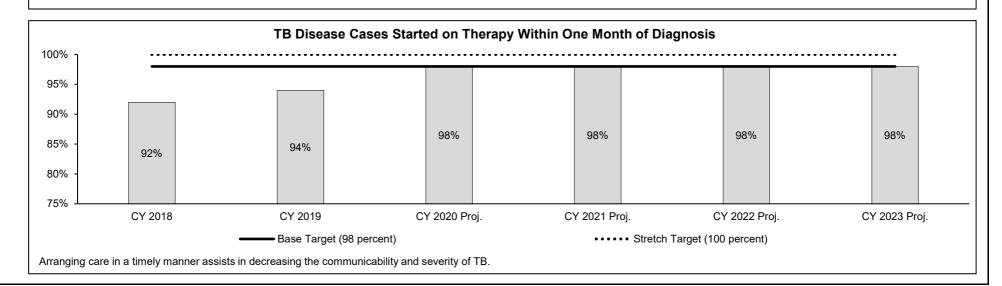
Program is found in the following core budget(s):

2c. Provide a measure(s) of the program's impact.



2018 National Level: 72 Percent.

Immunization rates for 19 to 35 months of age include the combined 7-Vaccine (4:3:1:3*:3:1:4) Series Recommended by US Centers for Disease Control and Prevention: 4 or more doses of DTaP, 3 or more doses of Polio, 1 or more doses of MMR, Hib full series (3 or 4 doses, depending on product type received), 3 or more doses of HepB, 1 or more doses of Varicella, and 4 or more doses of PCV. Higher immunization rates indicate greater protection against life-threatening vaccine-preventable diseases.



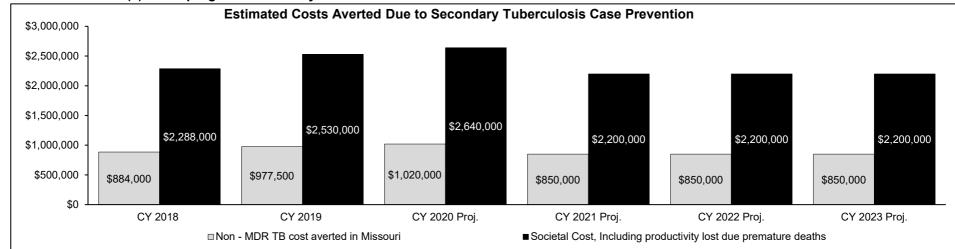
Health and Senior Services

HB Section(s): 10.700, 10.710, 10.755

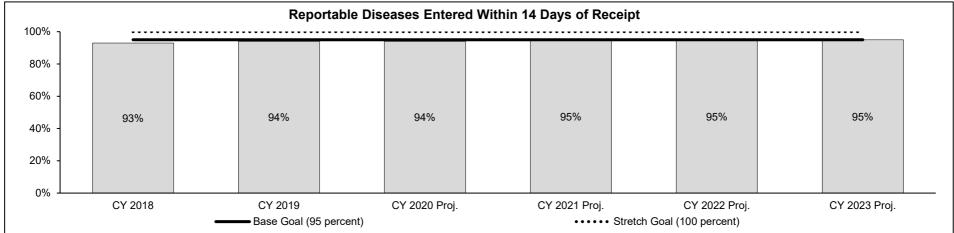
Communicable and Vector-borne Disease Control and Prevention

Program is found in the following core budget(s):

2d. Provide a measure(s) of the program's efficiency.



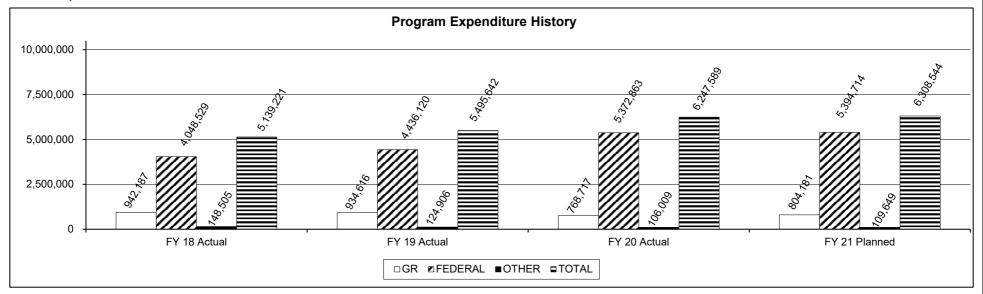
Cost averted is based on the number of Tuberculosis cases reported. The primary goal is to prevent all Tuberculosis cases, but when unable to, cost in treating results in a cost savings by preventing secondary cases.



Entering case reports into the reportable disease registry in a timely manner assists DHSS staff in investigations and arranging care for patients, thereby decreasing the communicability and severity of the disease.

Health and Senior Services	HB Section(s): 10.700, 10.710, 10.755
Communicable and Vector-borne Disease Control and Prevention	· · · · · · · · · · · · · · · · · · ·
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other" funds?

Health Initiatives (0275) and Department of Health and Senior Services - Donated (0658).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 192.020, 192.110, 192.138, 192.139, 192.320, 199.170-199.350, and 701.328, RSMo. Sections 167.181, 167.183, 192.006, 192.020, 192.072, 192.630, 210.003, and 210.030, RSMo. Section 317 of the Public Health Service Act, 42 USC Section 247b, as amended; Section 1902(a)(62) of the Social Security Act, 42 USC Section 1396(a)(62); Section 1928(a) of the Social Security Act, 42 USC Section 1396s(a).

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

Immunization programs are required to be administered in every US state and territory. Missouri's immunization program is 100 percent federally funded.

Department of Health and Senior Services	HB Section(s): 10.700, 10.710
Community Based Special Health Services	
Program is found in the following core budget(s):	

	DCPH Program	DCPH Program and		
	Operations	Contracts		TOTAL
GR	1,057,705	2,101,614		3,159,319
FEDERAL	1,509,822	1,386,207		2,896,029
OTHER	27,259	1,001,530		1,028,789
TOTAL	2,594,786	4,489,351		7,084,137

1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need and Enhance access to care.

1b. What does this program do?

Special Health Care Needs supports individuals with disabilities and chronic illness to improve their level of independence and overall health status by providing service coordination and authorization of program specific healthcare support services. Programs within Special Health Care Needs include:

- The Children and Youth with Special Health Care Needs (CYSHCN) Program provides service coordination for children under the age of 21 who meet medical eligibility criteria and provides limited funding for preventative, diagnostic, and treatment healthcare services for those children whose families also meet financial eligibility.
- The Healthy Children and Youth (HCY) Program and the Medically Fragile Adult Waiver (MFAW) Program provides administrative case management for these Medicaid programs, including authorization of medically necessary in-home services (for example personal care and nursing care) and coordination of services for Medicaid payment beyond the scope of the Medicaid state plan. Participants of HCY are under the age of 21, while MFAW participants are age 21 and over. Participants in both programs are medically complex and services provided by HCY and MFAW programs enable these participants to remain safely in their homes with their families, rather than receiving care in an institution.
- Adult Brain Injury (ABI) Program provides service coordination and community based rehabilitation services. Participants of ABI are ages 21 to 65 who are
 living with a traumatic brain injury (TBI). Service coordination links the participants to resources to enable each person to obtain goals of independent living,
 community participation, and/or employment. Participants may also receive community-based rehabilitation services to help achieve their identified goals.
 Rehabilitation services include counseling, vocational training, employment supports, and home and community-based support training.
- Brain Injury Waiver Program provides service coordination and home and community-based services to MO HealthNet recipients ages 21 to 65, who are living with a traumatic brain injury (TBI). Individuals must require medical care equivalent to the level of care received in a nursing home, not be enrolled in another waiver, and have been diagnosed with a TBI. Authorized services may include in-home personal care, applied behavioral analysis, assistive technology, cognitive rehabilitation therapy, environmental access and modification, neuropsychological evaluation, occupational therapy, physical therapy, and speech therapy.

Department of Health and Senior Services	HB Section(s): 10.700, 10.710
Community Based Special Health Services	·
Program is found in the following core budget(s):	

1b. What does this program do? (continued)

In addition to these programs, Special Health Care Needs also supports individuals through managing the following initiatives:

- Family Partnership for CYSHCN provides Family Partners, located throughout the state who are available to assist families impacted by special health care needs, resources and information that empower these families to live a good life. Each Family Partner is a parent of a child or youth with special health care needs and is equipped to explore options and solutions with the families they serve. Family Partners also host events that enable families to network and to stay current with trends and issues that may affect them.
- Kids Assistive Technology Project provides funding to Missouri Assistive Technology to assist children and youth with special health care needs with access to technology resources that help reduce their functional barriers.
- Federal TBI State Partnership Grant promotes system change initiatives and public awareness efforts through activities initiated with this grant, which in turn expand access to a comprehensive and coordinated system of services and supports for individuals with TBI.
- Missouri Brain Injury Advisory Council (MBIAC) established pursuant to Section 192.745, RSMo, provides staffing to assist the MBIAC in its statutory
 obligation to make recommendations to the Department of Health and Senior Services Director for developing and administering a state plan to provide
 services for individuals living with a brain injury.

2a. Provide an activity measure(s) for the program.

	FY 2018	FY 2019	FY 2020 Proj.*	FY 2021 Proj.	FY 2022 Proj.	FY 2023 Proj.
Children and Youth with Special Health Care Needs (CYSHCN) participants receiving service coordination	879	829	829	829	829	829
Children and Youth with Special Health Care Needs (CYSHCN) participants receiving diagnostic and treatment services**	777	723	723	723	723	723
Family Partnership for Children and Youth with Special Health Care Needs contacts	3,876	8,170	8,170	8,170	8,170	8,170
Kids Assistive Technology individuals served	27	28	28	28	28	28
Medicaid Healthy Children and Youth (HCY) participants	1,769	1,612	1,612	1,612	1,612	1,612
Medicaid Medically Fragile Adult Waiver (MFAW) participants	172	181	185	195	205	215
Adult Brain Injury (ABI) participants receiving service coordination	569	562	569	569	569	569
Adult Brain Injury (ABI) participants receiving provider rehabilitation services**	274	312	312	312	312	312
Medicaid Brain Injury Waiver (BIW) participants***	N/A	N/A	N/A	20	20	20

^{*}Data available November 2020.

^{**}This count is also reflected in the number of program participants receiving service coordination.

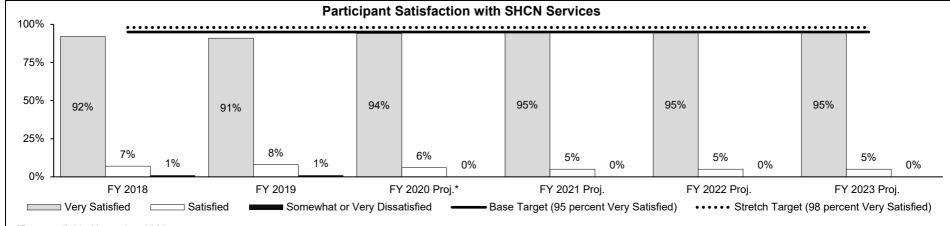
^{***}BIW was approved by CMS in October 2019. Program enrollment began in FY 2021.

Department of Health and Senior Services
Community Based Special Health Services

HB Section(s): 10.700, 10.710

Program is found in the following core budget(s):

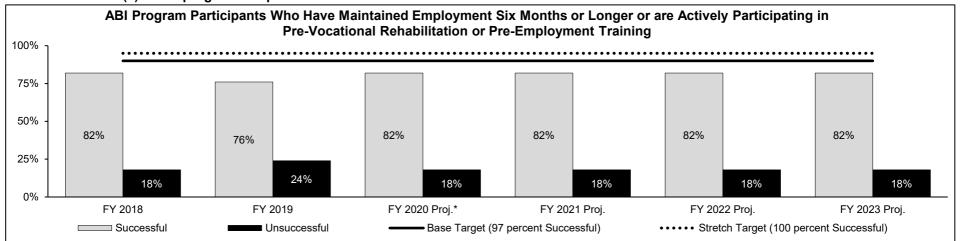
2b. Provide a measure(s) of the program's quality.



^{*}Data available November 2020.

Data obtained from assessments conducted with SHCN participants.

2c. Provide a measure(s) of the program's impact.



^{*}Data available November 2020.

This measure is specific to the participants that received pre-vocational, pre-employment, or supportive employment. Research indicates that individuals with TBI often experience difficulty securing and/or returning to competitive employment post injury and maintaining employment for extended periods of time.

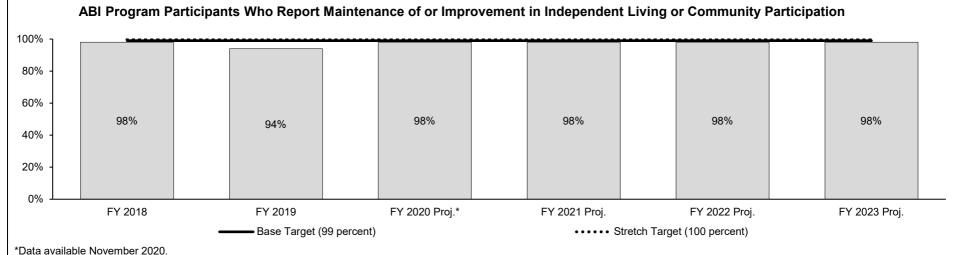
Department of Health and Senior Services

Community Based Special Health Services

Program is found in the following core budget(s):

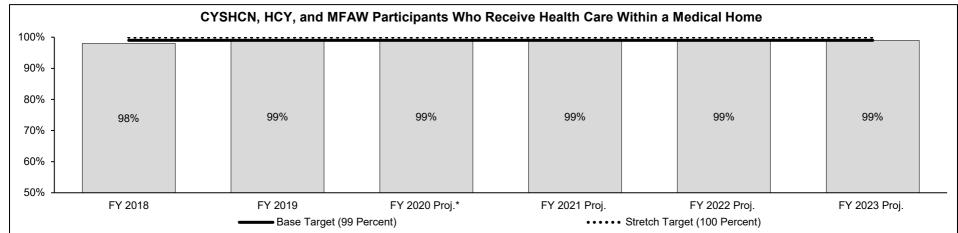
HB Section(s): 10.700, 10.710

2c. Provide a measure(s) of the program's impact. (continued)



*Data available November 2020.

Data obtained from assessments conducted with ABI participants.

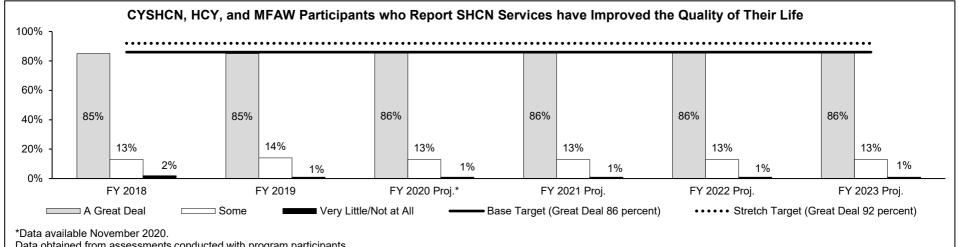


^{*}Data available November 2020.

Data obtained from assessments conducted with program participants. Access to a medical home is associated with increased quality of care, improved health outcomes, and decreased unmet medical needs.

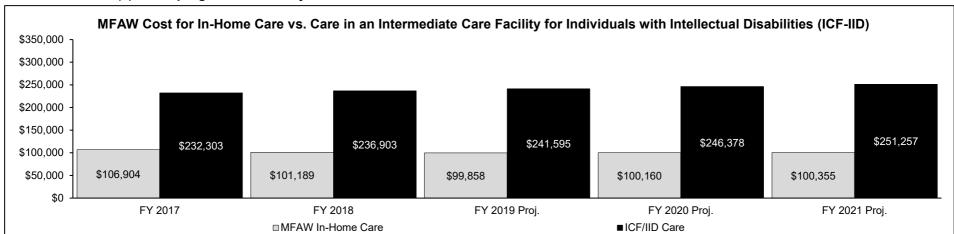
HB Section(s): 10.700, 10.710 Department of Health and Senior Services **Community Based Special Health Services** Program is found in the following core budget(s):

Provide a measure(s) of the program's impact. (continued)



Data obtained from assessments conducted with program participants.

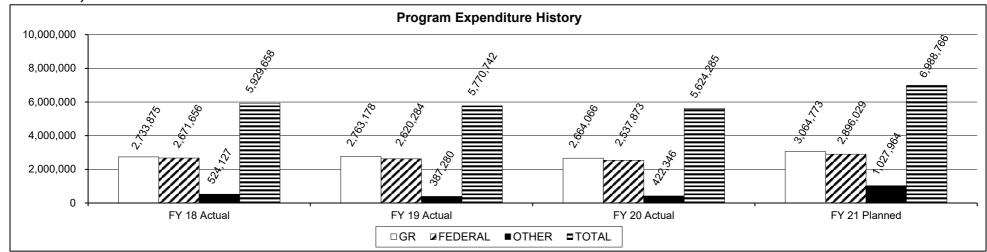
2d. Provide a measure(s) of the program's efficiency.



The cost for MFAW participants to receive services at home is significantly less than the cost for these individuals to live in a ICF/IID. This data is in accordance with the approved MFAW application for the years of 2017 to 2021. Due to provider billing processes, the actual annual cost per participant is not determined for a minimum of eighteen months following the end of the state fiscal year. Target is to keep MFAW in-home care costs less than the cost of ICD/IID Care.

Department of Health and Senior Services	HB Section(s): 10.700, 10.710
Community Based Special Health Services	<u></u>
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (*Note: Amounts do not include fringe benefit costs.*)



4. What are the sources of the "Other" funds?

Health Initiatives (0275), Brain Injury (0742), C&M Smith Memorial Endowment (0873), and Children's Special Health Care Needs Service (0950).

- 5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

 Sections 201.010 to 201.130, RSMo; Title V of the Social Security Act, Maternal and Child Health Block Grant, Sections 501 to 514; Sections 192.735-192.745, 199.003-199.009, and 304.028, RSMo; Title XIX of Social Security Act.
- 6. Are there federal matching requirements? If yes, please explain.

Yes, the Maternal and Child Health Grant supports SHCN and requires a three dollar non-federal, four dollar federal match; and maintenance of effort. In addition, Medicaid funds support a portion of SHCN, requiring General Revenue funds to match Federal funds. The TBI grant requires a 50 percent match of state funds for every federal dollar granted.

7. Is this a federally mandated program? If yes, please explain.

Yes, states receiving the Maternal and Child Health Block Grant funds are required to have a Children with Special Health Care Needs Program. Also, the existence of a brain injury advisory council is highly recommended in order to receive the federal TBI grant. (TBI grant funds may not be used for direct services or care coordination.)

Health and Senior Services

Community Health Initiatives

Program is found in the following core budget(s):

DCPH Program | DCPH Program | DCPH Programs and | DCPH Programs and | DCPH Programs | DCPH Progra

	DCPH Program	DCPH Programs and			
	Operations	Contracts			TOTAL
GR	51,737	110,144			161,881
FEDERAL	1,347,526	3,883,186			5,230,712
OTHER	56,602	0			56,602
TOTAL	1,455,865	3,993,330			5,449,195

1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need.

1b. What does this program do?

The Community Health Initiatives program implements the following activities and evidence-based interventions in communities, child care centers, schools, and worksites to reduce tobacco use and exposure to secondhand smoke, prevent unintentional injuries, reduce teen pregnancies, reduce obesity, and improve the management of children with chronic disease in the school setting:

- Provides professional development opportunities for stakeholders, such as child care providers, school food service staff, local public health agencies, and employers;
- Develops and disseminates resources such as toolkits on implementing physical activity in child care, farm to preschool programs, which expose preschoolers to local fruit/vegetables and gardening, school tobacco policies, and worksite wellness information for employees;
- Provides technical assistance and consultation services, including the State School Nurse Consultant, who works with all Missouri school districts;
- Oversees the Missouri Tobacco Quitline, which provides tobacco cessation services, including coaching calls and nicotine replacement therapies to eligible callers;
- Administers contracts to local agencies to implement evidence-based strategies, including ten Safe Kids contracts to provide local injury prevention services;
- Provides leadership across state and national organizations to create cohesive strategies to impact change, including leading the Missouri Injury and Violence Prevention Advisory Committee and Council for Adolescent and School Health; and
- Conducts outreach campaigns, such as Talk with Me, a campaign to encourage adults to have conversations with youth regarding health development in order to increase awareness and action for a healthier lifestyle.

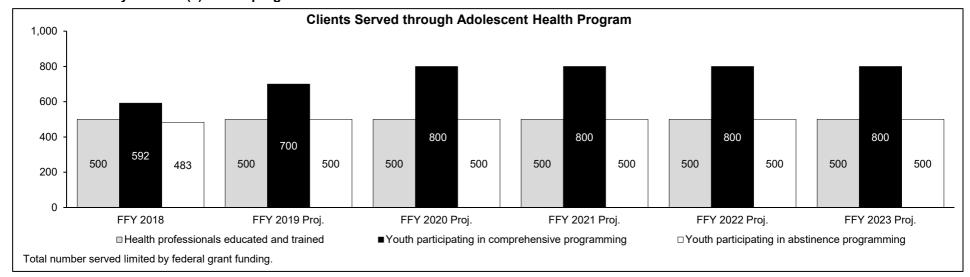
Health and Senior Services

Community Health Initiatives

HB Section(s): 10.700, 10.710, 10.715

Program is found in the following core budget(s):

2a. Provide an activity measure(s) for the program.



Tobacco Quitline Calls (Includes Web-Only Enrollments)							
	FY 2018	2018 FY 2019 FY 2020* FY 2021 FY 2022 Proj. Proj.					
Medicaid	1,210	1,195	611	750	900	1,050	
Uninsured	1,404	1,445	809	950	1,050	1,200	
Pregnant	57	39	39	50	50	50	
All calls	5,012	5,993	6,512	6,500	6,500	6,500	

*Began offering individual services (text, email, materials, Nicotine Replacement Therapy) in addition to phone and web-only programs on June 1, 2019.

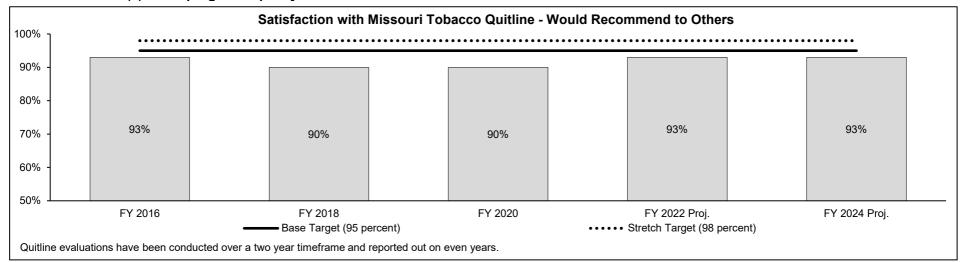
Health and Senior Services

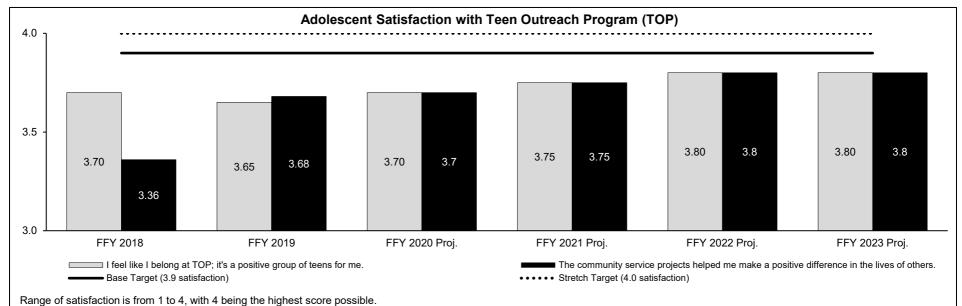
Community Health Initiatives

HB Section(s): 10.700, 10.710, 10.715

Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality.





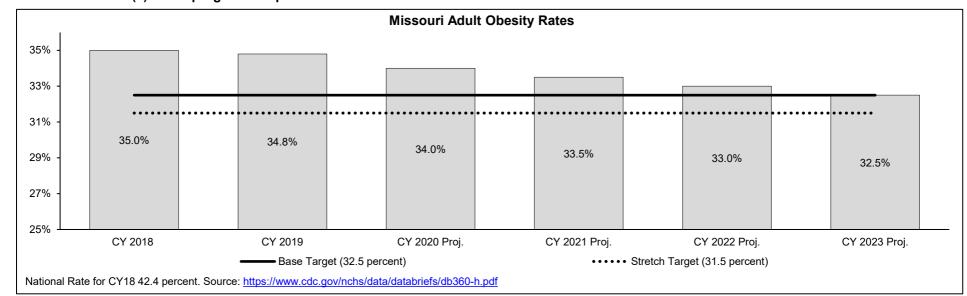
Health and Senior Services

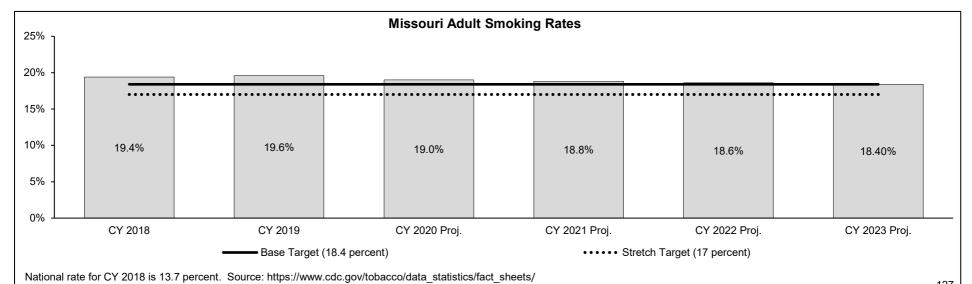
Community Health Initiatives

HB Section(s): 10.700, 10.710, 10.715

Program is found in the following core budget(s):

2c. Provide a measure(s) of the program's impact.





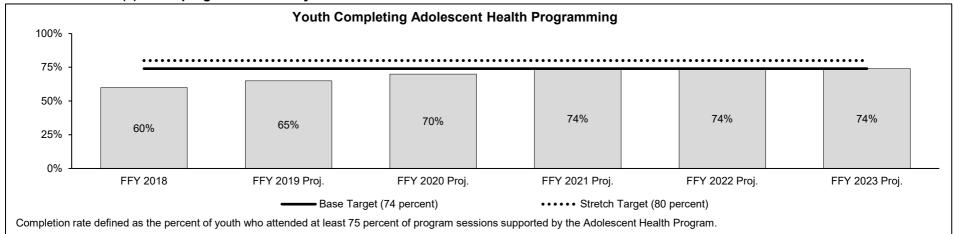
Health and Senior Services

Community Health Initiatives

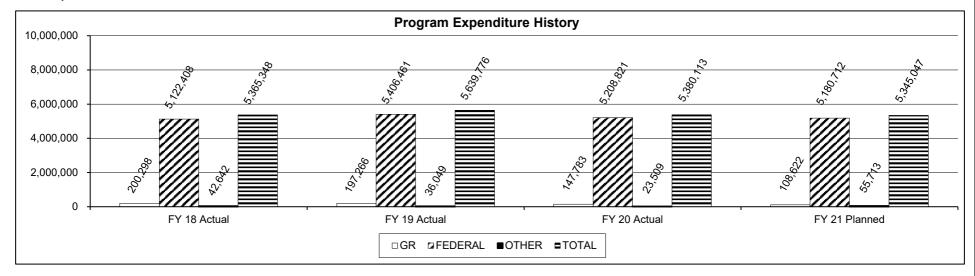
Program is found in the following core budget(s):

HB Section(s): 10.700, 10.710, 10.715

2d. Provide a measure(s) of the program's efficiency.



3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



Health and Senior Services	HB Section(s): 10.700, 10.710, 10.715
Community Health Initiatives	<u> </u>
Program is found in the following core budget(s):	

4. What are the sources of the "Other" funds?

Health Initiatives (0275) and Governor's Council on Physical Fitness Trust (0924).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Missouri Comprehensive Tobacco Control Program: Public Health Service Act 301, 307, 310, 311, Comprehensive Smoking Education Act of 1984, Comprehensive Smokeless Tobacco Health Education Act of 1986. Center on Drugs and Public Policy Program: PART A, TITLE XIX, PHS Act, as amended. Team Nutrition: Section 19 of the Child Nutrition Act of 1966; Public Law 108-265, Child Nutrition and WIC Reauthorization Act of 2004. P.L. 110-161. Obesity Prevention: Part A, Title XIX, PHS Act, as amended; Public Health Service Act Sections 307 and 317 (k)(1) [42 USC 2421 and 247 b(k)(1)]; and 301A, 311BC, 317K2 (42USC241A, 243BC247BK2). Injury Prevention: Social Security Act, Title V, 45 CFR 96. Adolescent Health: Sections 167.765, 167.682, 170.15 and 192.025, RSMo.

6. Are there federal matching requirements? If yes, please explain.

Yes, the Title V Maternal and Child Health Services Block Grant partially supports this program and requires a three dollar non-federal match for every four dollars of federal funds received. This grant also requires maintenance of effort.

7. Is this a federally mandated program? If yes, please explain.

The Title V Maternal and Child Health Block Grant requires the state to address the Adolescent Health Domain for the 2016-2021 project period. Activities of the Adolescent Health Program and Injury Prevention Program ensures this domain is addressed.

Health and Senior Services

Environmental Public Health

Program is found in the following core budget(s):

DCPH Program

DCPH Program and Office of Emergency

HB Section(s): 10.700, 10.710, 10.755

HB Section(s): 10.700, 10.710, 10.755

DCPH Program of DCPH Program and Office of Emergency

	DCPH Program Operations	DCPH Program and Contracts	Office of Emergency Coordination			TOTAL
GR	1,253,262	14,832	0			1,268,094
FEDERAL	2,614,216	858,641	127,840			3,600,697
OTHER	708,620	1,000	0		·	709,620
TOTAL	4,576,098	874,473	127,840		·	5,578,411

1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need.

1b. What does this program do?

This program works to reduces the risk of illness, injury, and death related to environmental causes by assessing and promoting the reduction of chemicals in the environment and implementing and assuring sanitation and safety practices, which protect and promote overall wellness and increase positive health outcomes for Missourians.

- A. Tracks and responds to environmental emergencies and emerging diseases (such as COVID-19 and legionella), foodborne illness outbreaks, food recalls, emergency preparedness planning, incidents involving radioactive materials, transportation accidents involving food, natural disasters, and environmental and medical follow up for children with elevated blood lead levels.
- B. Provides training and technical assistance to local public health agencies (LPHAs) and industry (technical assistance for first responders and community partners, safe food handling best practices, sanitation and safety requirements for child care facilities, lodging establishments, legionella water management plans, childhood lead poisoning, and onsite wastewater treatment systems (OWTSs)).
- C. Issues permits and licenses (construction permits for OWTSs, licenses lodging establishments, accredits lead abatement training programs, licenses lead abatement professionals and contractors, and registers OWTS installers, soil evaluators, and inspectors).
- D. Inspects regulated facilities and environmental sites (food establishments, food manufacturing/processing plants, child care facilities, summer food sites, lodging establishments, frozen dessert machines, healthcare facility legionellosis, radioactive shipments, and lead abatement projects).
- E. Provides assessment and surveillance of environmental public health issues (hazardous substance exposure risks, appropriate clean up level determination), collects, integrates, and analyzes data on health effects related to environmental health hazards (algal blooms, recreational water, heat and cold related deaths, carbon monoxide deaths), provides epidemiology studies, and assures at-risk children are tested for lead poisoning.
- F. Provides environmental health education to the general public (hazardous substance exposures and conditions, waste sites, sampling of residential drinking wells, radon kits, indoor air quality and other indoor environmental issues, proper food handling, proper care of OWTSs, lead-safe work practices, annual fish consumption advisory, and blood lead testing).
- G. Responds to citizen concerns and complaints (bedbugs, food service, lodging, child-care complaints, radon, and radiation exposures).
- H. Collaborates to leverage resources between federal, state, and local entities for efficient and effective use.

Health and Senior Services	HB Section(s): 10.700, 10.710, 10.755
Environmental Public Health	
Program is found in the following core budget(s):	

2a. Provide an activity measure(s) for the program.

Program Activities for the Time Period for:	FY 2018	FY 2019	FY 2020
COVID-19 activities/responsibilities as assigned ^A			14,022 hours
Lodging facility licenses issued (new + annual renewal) C,D,H	1,493	1,512	1,421
Facilities with completed legionella environmental assessments (started 12/18) B,D,E,H	9	47	26
Environmental child care inspections (Oct 1-Sept 30) B,D,H	6,350	6,250	3,605*
Citizens provided information and assistance at outreach events ^{F,H}	13,914	13,914	10,744
Onsite waste water professionals trained by DHSS ^B	340	437	330
Frozen dessert licenses issued ^{C,D,H}	1,826	2,015	1,554
Food recall activities G,H	485	517	448
Food manufacturing facility inspections D,G,H	606	762	592
Lead abatement projects inspected ^D	361	263	482
Lead abatement professionals/contractors licensed ^C	1,403	704	627
Radon kits provided to Missouri citizens ^{E,F}	8,550	3,312	2,427
Classrooms in schools tested for radon ^{E,F}	5,657	432	1,562
Indoor air quality investigations/technical assistance E,F,H	436	236	98
Fish Consumption Advisory Web hits ^F	2,697	1,918	1,656
Environmental Public Health Tracking Network Web hits ^{F,H}	14,387	14,283	13,764
Environmental risk assessment and medical referral for lead poisoned children E,F,G,H	2,536	2,396	2,797
Blood lead poisoning surveillance (children less than age six tested for lead) E,F,H	82,190	81,212	79,118
Radiation Shipments tracked through Missouri G,H	462	441	446
High level radiation shipments inspected ^{D,G,H}	21	45	21
Citizens educated on hazardous substance exposures ^F	7,200	12,675	4,145
Private drinking water wells sampled ^{E,F,H}	92	29	154
*Data available November 2020. Footnotes A,B,C,D,E,F,G,H correspond to lettered activities in question 1b above.			

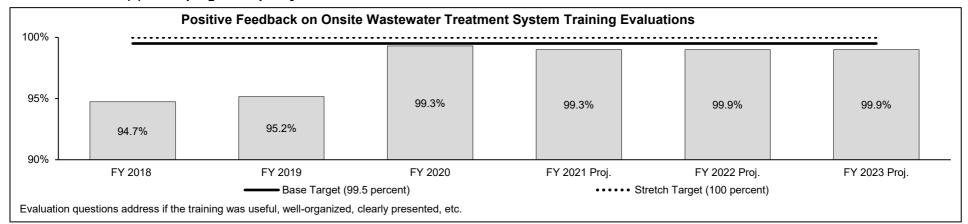
Health and Senior Services

Environmental Public Health

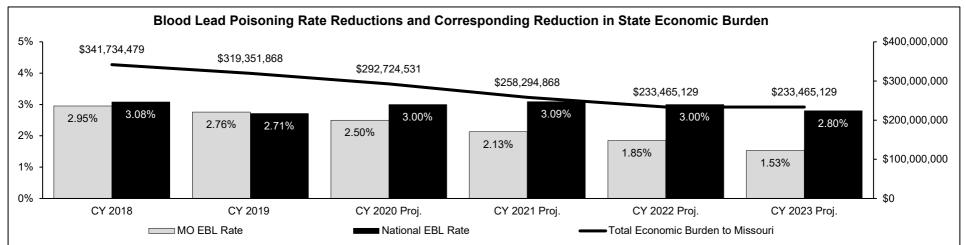
HB Section(s): 10.700, 10.710, 10.755

Program is found in the following core budget(s):

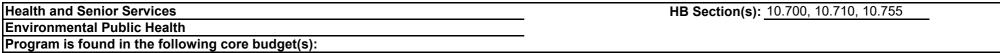
2b. Provide a measure(s) of the program's quality.



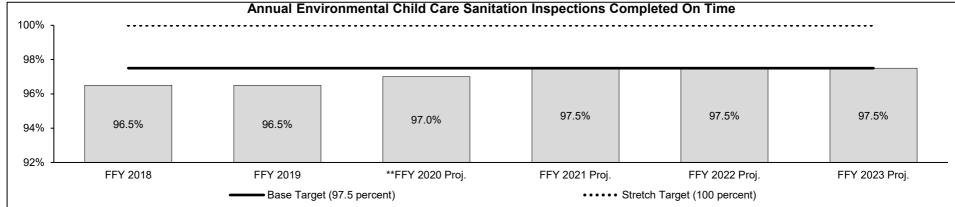
2c. Provide a measure(s) of the program's impact.



EBL = Elevated Blood Lead; ug/dL = micrograms lead per deciliter of blood. Base Target is for Missouri to be at or below the national EBL rate. Stretch target is elimination of lead poisoning in Missouri. Lead poisoning in children can cause a lifetime of cognitive and developmental challenges. As Missouri reduces the rate of elevated EBL's in children, the state's economic burden is also reduced as there is avoidance of lifetime earnings lost due to lead poisoned children.

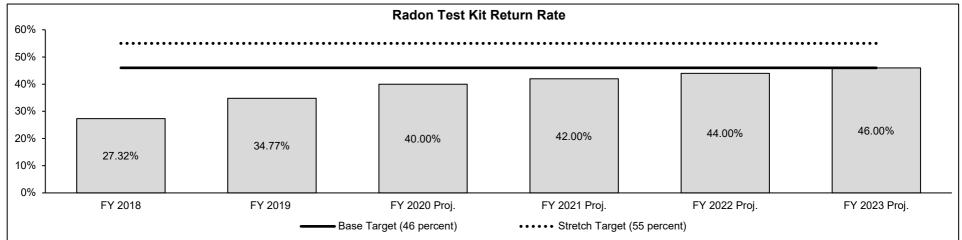


Provide a measure(s) of the program's efficiency.



^{*}On time inspections per contract are within 60 days of the request date for routine requests and within 15 days of the request date for complaints.

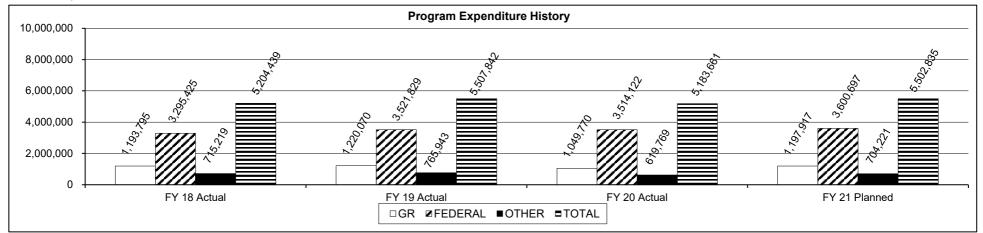
**Data available November 2020.



Radon test kits are issued at homeowner's request. The homeowner completes the testing, then returns the test kit in order to get results. Return rates are projected to increase due to the program nearing completion of a new contract for radon test kits that promise higher return rates.

Health and Senior Services	HB Section(s): 10.700, 10.710, 10.755
Environmental Public Health	
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Federal funds consist of Department of Health and Senior Services Federal (0143) and Department of Health and Senior Services Federal Stimulus (2350). Other funds consist of Health Initiatives (0275), Missouri Public Health Services (0298), Environmental Radiation Monitoring (0656), Hazardous Waste (0676), and Missouri Lead Abatement Loan Program (0893).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Chapters 192, 196, 210, 260, 315, 701, and Sections 44.100 (4)(h), 210.199-275, and 701.300-349, RSMo; 19 CSR 20-1.025, 19 CSR 20-3.015-3.080,19 CSR 20-3.050, 19 CSR 20-10.010-10.200, 19 CSR 20-20.020, 19 CSR 20-20.075, 19 CSR 20-20.080, and 19 CSR 20-8.030; Federal Statutory or Regulatory Citation: CERCLA Section 104(I)(15); CERCLA Section 104, CERCLA Section 14(I)(15); 40 CFR parts 31 and 35, Sub-part O; FEMA-REP-1 NUREG 0654.

6. Are there federal matching requirements? If yes, please explain.

Yes, Title XIX for lead screening requires a 50 percent state match for administrative costs and a 25 percent state match for costs associated with skilled medical activities. The Environmental Protection Agency Radon Grant requires a 40 percent state match.

7. Is this a federally mandated program? If yes, please explain.

No.

HP Costion(s): 10 700 10 710

Department of n	ealth and Semon Services		HB Section(s): 10.710
Genetics and Ne	wborn Services		-
Program is found	d in the following core budg		
	DCPH Program Operations	DCPH Programs and Contracts	TOTAL
GR	216,135	959,146	1,175,281
FEDERAL	927,039	4,217,160	5,144,199
OTHER	79,086	1,534,281	1,613,367

1a. What strategic priority does this program address?

Reduce opioid abuse, Improve the health and safety of Missourians most in need, and Enhance access to care.

6.710.587

1b. What does this program do?

TOTAL

Department of Health and Senior Services

- The Genetics and Newborn Services program provides education, outreach, and interventions to improve women's prenatal, maternal, and child health; increase healthier births; promote normal growth and development outcomes; increase school readiness; and facilitate healthy outcomes throughout the lifespan. These outcomes are achieved through the following activities:
 - Promoting early entrance into prenatal care;
 - Promoting and providing education on healthy behaviors starting at preconception, examples include:
 - Developing and promoting educational materials, social media messages, and multimedia marketing campaigns to educate the public on healthy behaviors and available resources;
 - o Promoting the Count the Kicks program to reduce still births;
 - o Promoting use of folic acid to reduce birth defects;

1.222.260

- $\circ\hspace{0.1in}$ Promoting the avoidance of smoking, alcohol, and other drugs during pregnancy;
- o Promoting breastfeeding; and
- o Promoting healthy parenting skills.
- Administering a confidential, toll-free Maternal Child Health Information and Referral Line that connects families with programs and services (TEL-LINK);
- Administering the provision of voluntary evidence-based home visitation model services to low income at-risk prenatal and postpartum women and their infants and children (up to age 5) to improve pregnancy and infant health outcomes;
- Providing newborn screening tracking and follow-up for over 70 different rare disorders, including hearing loss and critical congenital heart disease;
- · Providing safe portable cribs and safe sleep education to low-income families;
- Collaborating with child abuse medical resource centers to provide training, support, and mentoring to Sexual Assault Forensic Examination-Child Abuse Resource and Education (SAFE-CARE) medical providers;
- · Providing screening, diagnostic evaluations, treatment, and counseling for Missourians with genetic conditions; and
- Providing metabolic formula for adults and children with metabolic conditions.

7.932.847

Department of Health and Senior Services	HB Section(s): 10.700, 10.710
Genetics and Newborn Services	
Program is found in the following core budget(s):	

2a. Provide an activity measure(s) for the program.

Clients Served by Newborn Health Services							
	FFY 2018	FFY 2019	FFY 2020 Proj.*	FFY 2021 Proj.	FFY 2022 Proj.	FFY 2023 Proj.	
Educational Materials Distributed	417,011	405,089	400,000	400,000	400,000	400,000	
Safe Cribs Distributed	406	334	292**	335	400	460	
Safe Sleep Education Sessions	655	626	574**	625	700	775	
Number of TEL-LINK Referrals	2,167	2,912	2,900	2,900	2,900	2,900	

^{*}Data available December 2020.

^{**}Decrease in Safe Cribs Program utilization and education sessions is due to COVID-19 being a top priority for Local Public Health Agencies.

Home Visitation Clients Served							
	FFY 2018	FFY 2019	FFY 2020 Proj.*	FFY 2021 Proj.	FFY 2022 Proj.	FFY 2023 Proj.	
Building Blocks	302	364	325	325	325	325	
Maternal, Infant, and Early Childhood Home Visiting (MIECHV)	508	576	525*	575**	575**	575**	
Healthy Families Missouri Home Visiting	139	147	140	140	140	140	
TOTAL	949	1,087	990	1,040	1,040	1,040	

^{*}The FFY 2020 projection is less due to a caseload reduction recommended by the National Home Visiting Model. Data available December 2020

^{**}The increase of the projections for FFY 2021, 2022, and 2023 are due to redistribution of funding to support more caseload capacity as a result of a MIECHV supported agency declining the FFY 2021 contract and an award of a new RFP for expanded services in FFY 2021.

Department of Health and Senior Services	HB Section(s): 10.700, 10.710
Genetics and Newborn Services	·
Program is found in the following core budget(s):	

2a. Provide an activity measure(s) for the program. (continued)

Newborn Blood Spot Screening Tracking and Follow-up							
The Missouri Newborn Blood Spot Screening Program tracked, followed, and provided educational information to the parents of:	CY 2018	CY 2019	CY 2020 Proj.*	CY 2021 Proj.	CY 2022 Proj.	CY 2023 Proj.	
Newborns referred to contracted referral centers for follow-up of abnormal newborn blood spot screening results.	676	577	625	625	625	625	
Newborns diagnosed with disorders identified through newborn blood spot screening.	182	168*	200	200	200	200	
Newborns with hemoglobinopathy trait identified through newborn blood spot screening.	1,644	1,555	1,500	1,500	1,500	1,500	
Newborns who need a repeat blood spot screening.	2,118	2,915	2,500	2,500	2,500	2,500	
Newborns who missed the blood spot screening.	305	260	300	300	300	300	
**Data available November 2020.	•	•	•				

Newborn Hearing Screening Tracking and Follow-up							
The Missouri Newborn Hearing Screening Program tracked, followed, and provided educational information to the parents of:		CY 2019	CY 2020 Proj.	CY 2021 Proj.	CY 2022 Proj.	CY 2023 Proj.	
Newborns who failed to pass their initial newborn hearing screening.	2,445	2,492	2,400	2,400	2,400	2,400	
Newborns who missed their hearing screening.	575	445	500	500	500	500	
Newborns who were diagnosed with permanent hearing loss and referred to early intervention via Missouri's Part C Program, First Steps.		95	95	95	95	95	

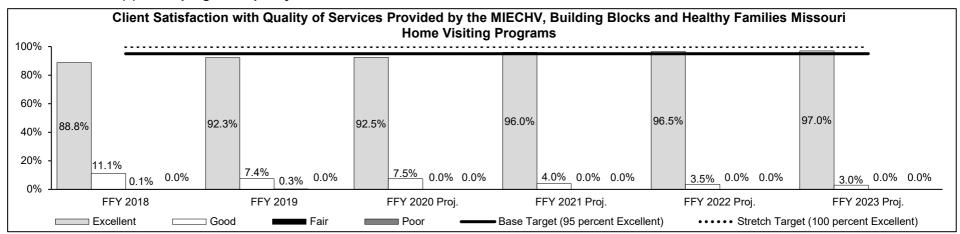
Department of Health and Senior Services

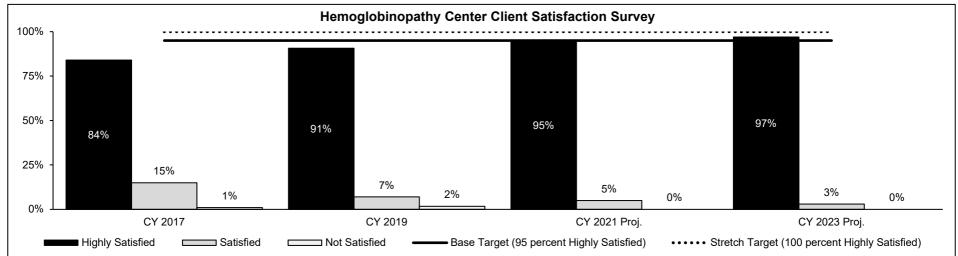
HB Section(s): 10.700, 10.710

Genetics and Newborn Services

Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality.





This survey is given to hemoglobinopathy patients to evaluate their level of satisfaction with the care they receive at the hemoglobinopathy centers. DHSS contracts with four pediatric and three adult hemoglobinopathy centers to provide newborn screening follow-up and comprehensive medical services (i.e. inpatient, outpatient, and emergency care) for individuals and families with sickle cell disease and other related disorders. The survey is conducted every 2 years.

Department of Health and Senior Services

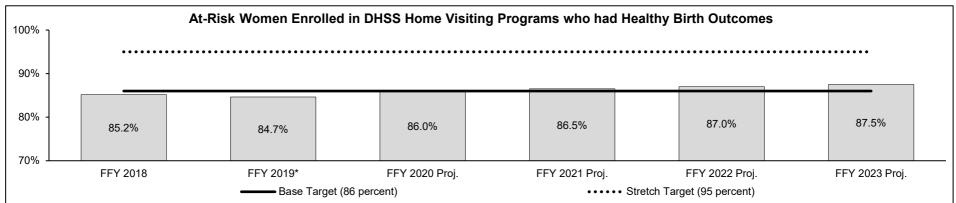
Genetics and Newborn Services

Program is found in the following core budget(s):

HB Section(s): 10.700, 10.710

2c. Provide a measure(s) of the program's impact.

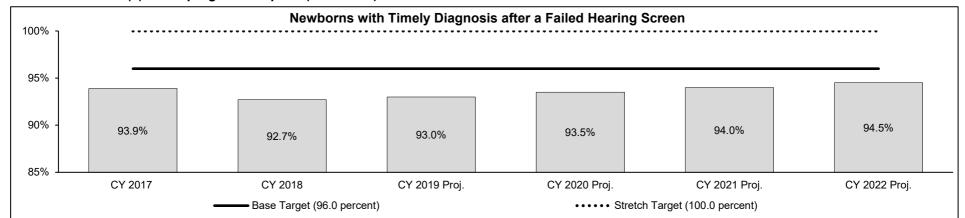




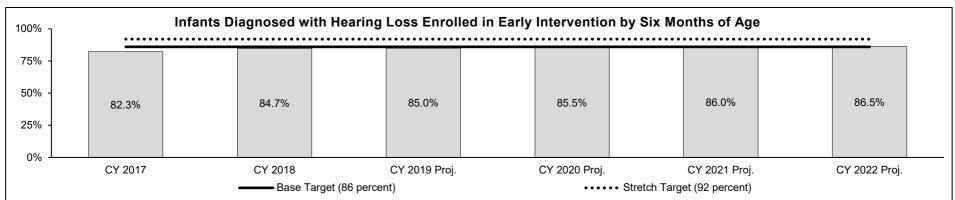
*The decreased percentage for FFY 2019 is likely contributed to the closure of a major birthing hospital in Kennett, MO, in Dunklin county, one of the five counties surveyed by MIECHV home visiting. Several births from this population occurred between 35 to 36 weeks and are speculated to have been elective due to increased distance to the next closest birthing hospital to the client. Healthy birth outcomes are defined as births occurring at 37 or greater weeks gestation.

Department of Health and Senior Services	HB Section(s): 10.700, 10.710
Genetics and Newborn Services	• • • • • • • • • • • • • • • • • • • •
Program is found in the following core budget(s):	•

2c. Provide a measure(s) of the program's impact. (continued)



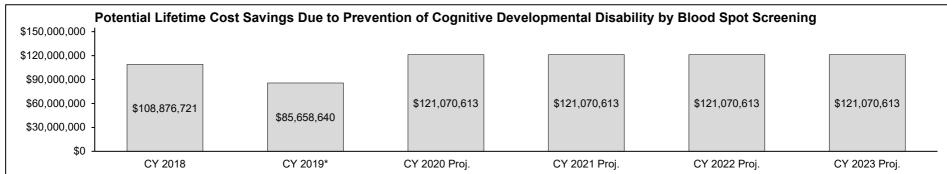
Universal newborn hearing screening, when accompanied by timely access to outpatient rescreening, audiologic diagnostic evaluation, and intervention services (e.g. training in sign language, hearing amplification services, and speech language services), can improve language, social, and emotional outcomes for children born deaf or hard of hearing and result in economic benefits to society. The purpose of Missouri's Newborn Hearing Screening Program is to screen all infants for hearing loss by one month of age, ensure those infants that fail screening are evaluated to identify hearing loss by three months of age, and ensure all infants diagnosed with permanent hearing loss are enrolled in an early intervention program by six months of age.



Appropriate intervention must occur within the first six months of life in order for children born with hearing loss to develop language skills matching their typical hearing peers by five years of age. The purpose of Missouri's Newborn Hearing Screening Program is to screen all infants for hearing loss by 1 month of age, ensure those infants that fail screening are evaluated to identify hearing loss by 3 months of age, and ensure all infants diagnosed with permanent hearing loss are enrolled in an early intervention program by 6 months of age.

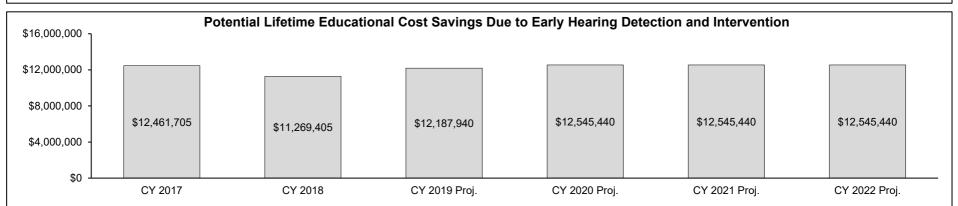
Department of Health and Senior Services	HB Section(s): 10.700, 10.710
Genetics and Newborn Services	·
Program is found in the following core budget(s):	

2d. Provide a measure(s) of the program's efficiency.



*Data available January 2020.

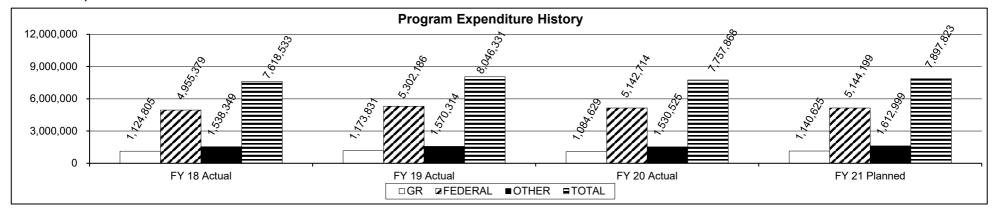
In 2003, the Center for Disease Control and Prevention (CDC) estimated the average lifetime costs per person with cognitive developmental disability to be approximately \$1,014,000. The U.S. Bureau of Labor Statistics Consumer Price Index Inflation Calculator was used to calculate inflation over time. The number of disorders detected varies from year to year due to variables in incidence. The numbers of infants in this chart only includes those with disorders on the blood spot screening panel where cognitive developmental disability is a symptom and where there is evidence to show that early diagnosis and treatment prevents this specific disability. Disorders included are: biotinidase deficiency, congenital adrenal hyperplasia, congenital primary hypothyroidism, galactosemia, amino acid disorders, fatty acid disorders, and organic acid disorders. Additional cost savings are likely associated with the remaining blood spot disorders, however, there is not sufficient data to provide a dollar estimate. The program did not set targets as it is not possible to project the number of children identified with the specified conditions.



The CDC estimated the lifetime educational cost of undiagnosed or untreated hearing loss at \$115,600 per child (year 2007 value for permanent hearing loss without other disabilities.) The CDC estimated cost of newborn hearing screening was \$26 in 2010. The U.S. Bureau of Labor Statistics Consumer Price Index Inflation Calculator was used to calculate inflation over time. Total savings was calculated as (number of infants diagnosed x average lifetime cost) - (cost of hearing screening x total newborns screened). The program did not set targets as it is not possible to project the number of children identified with the specified conditions.

Department of Health and Senior Services	HB Section(s): 10.700, 10.710
Genetics and Newborn Services	
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other" funds?

Health Initiatives Fund (0275) and Missouri Public Health Services (0298).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 191.300 - 191.380 RSMo (Adult Genetics and Metabolic Formula; Sections 191.331 - 191.332 RSMo (Newborn Blood Spot Screening)); Sections 191.925 - 191.931, RSMo (Newborn Hearing Screening); Section 191.334, RSMo (Newborn Critical Congenital Heart Disease Screening); Sections 192.060 and 192.067, RSMo (Pregnancy Associated Mortality Review); Sections 191.725, 737, and 743, RSMo (Perinatal Substance Abuse); and the Federal Omnibus and Reconciliation Act (OBRA 89) and Maternal Child Health Information and Referral Line and Section 192.001.1, RSMo (TEL-LINK). This also includes the Social Security Act; Title V, Maternal and Child Health Services Title V Block Grant Sections 501 - 510; § 511 (c) Maternal, Infant and Early Childhood Home Visiting Programs (42 U.S.C. § 711 (c)), as added by § 2951 of the Patient Protection and Affordable Care Act (P.L. 111 - 148), reauthorization and appropriation for FFY16 provided through Medicare Access and CHIP Reauthorization Act (P.L. 114-10).

6. Are there federal matching requirements? If yes, please explain.

Yes. The Maternal and Child Health Services Title V Block Grant partially supports this program and requires a three dollar non-federal match for every four dollars of federal funds received, and requires maintenance of effort.

Department of Health and Senior Services	HB Section(s): 10.700, 10.710
Genetics and Newborn Services	
Program is found in the following core budget(s):	
7 Is this a foderally mandated program? If yes, please explain	

7. Is this a federally mandated program? If yes, please explain.

Yes. Federal Omnibus and Reconciliation Act (OBRA 89) and Maternal Child Health Information and Referral Link (TEL-LINK) and Social Security Act, Title V, § 511 (c) Maternal, Infant and Early Childhood Home Visiting Programs (42 U.S.C. § 711 (c)), as added by § 2951 of the Patient Protection and Affordable Care Act (P.L. 111-148).

Department of Health and Senior Services

Health Information and Epidemiology

HB Section(s): 10.700, 10.710

Program is found in the following core budget(s):

		, , ,			
	DCPH Program Operations	DCPH Programs and Contracts			TOTAL
GR	485,630	0			485,630
FEDERAL	1,672,549	1,785,102			3,457,651
OTHER	24,049	0			24,049
TOTAL	2,182,228	1,785,102			3,967,330

1a. What strategic priority does this program address?

Reduce opioid misuse and Improve the health and safety of Missourians most in need.

1b. What does this program do?

The Bureau of Health Care Analysis and Data Dissemination and the Bureau of Epidemiology and Vital Statistics are responsible for collecting, analyzing, and providing health information on a range of health conditions and diseases, risk factors, and preventative practices. This information is used by local, state, and national partners in addressing the overall health and wellness of Missourians. Areas of emphasis include, but are not limited to, substance abuse, maternal and child health, chronic disease, and communicable disease. Activities include:

- Serving as the subject matter experts on issues affecting Missourians across their lifespan.
- · Collecting, analyzing, and interpreting health related data for use by internal and external stakeholders.
- Providing statistical and analytical services to many state public health programs and the public through ad-hoc requests, publications, online data applications, presentations, and exhibits.
- Providing the information necessary to shape policy decisions and promote evidence based practices, which assist public health organizations (local, state, and national) to increase positive health behaviors and promote overall public health.

2a. Provide an activity measure(s) for the program.

Health Information Services Provided									
	FY 2022 Proj.	FY 2023 Proj.							
Data Requests	523	583	341	Proj . 482	469	431			
Exhibits	12	9	11	11	10	11			
Customized Presentations	31	42	38	37	39	38			
Publications	12	55	51	39	48	46			

Note: Services provided primarily used the following data sources: Missouri Public Health Information Management System (MOPHIMS) web query system, Missouri vital statistics, Patient Abstract System, Pregnancy Risk Assessment Monitoring System (PRAMS), Pregnancy Mortality Surveillance System (PMSS), Enhanced State Opioid Overdose Surveillance (ESOOS), Missouri Violent Death Reporting System (MOVDRS), and Behavioral Risk Factor Surveillance System (BRFSS). Due to staff reassignments to meet department priorities, the number of data requests filled during March to June 2020 were drastically lower than previous years.

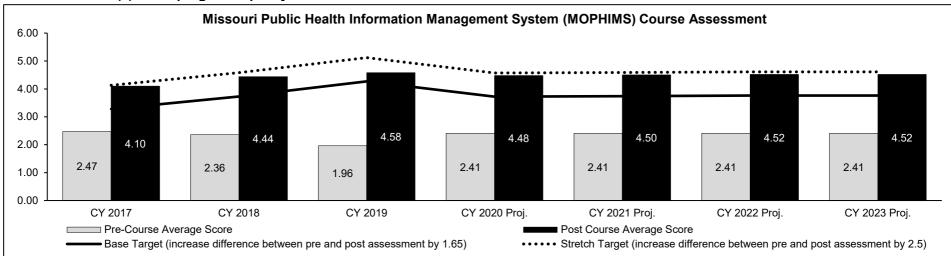
HB Section(s): 10.700, 10.710

Department of Health and Senior Services

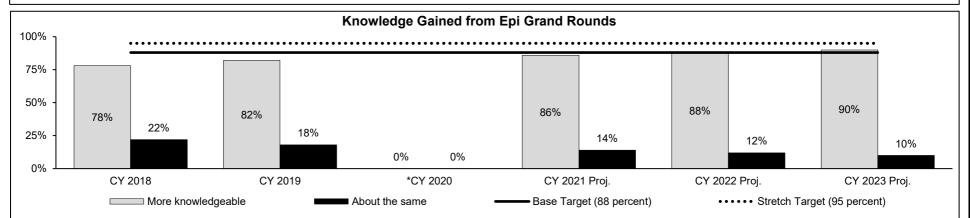
Health Information and Epidemiology

Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality.



Rating 1 to 5, with 5 being the best. The Missouri Public Heath Information Management System (MOPHIMS) is a freely accessible web query system that allows users to access health data information that can help inform priorities, programs, and interventions in their communities. Primary data sources: MOPHIMS web query system, Missouri vital statistics, PAS, PRAMS, PMSS, ESOOS, MOVDRS, and BRFSS.



*No Epi Grand Rounds were scheduled during CY 2020 due to staff reassignments to meet department priorities.

Epi Grand Rounds are customized presentations from the following primary data sources: MOPHIMS web query system, Missouri vital statistics, PAS, PRAMS, PMSS, ESOOS, MOVDRS, and BRFSS.

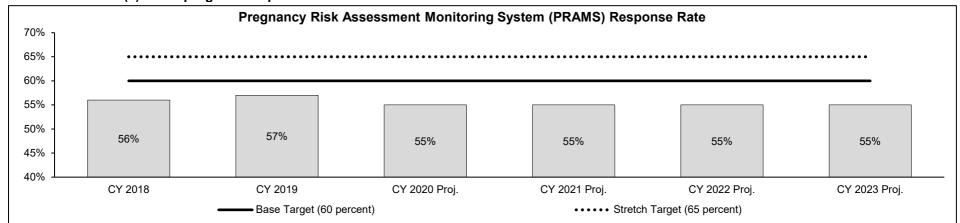
Department of Health and Senior Services

Health Information and Epidemiology

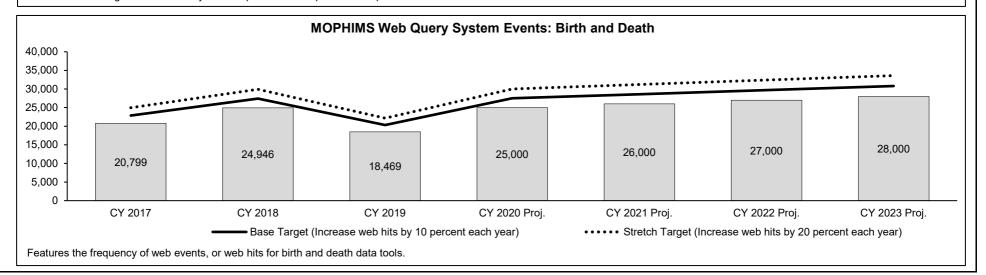
Program is found in the following core budget(s):

HB Section(s): 10.700, 10.710

2c. Provide a measure(s) of the program's impact.



PRAMS is an ongoing, population-based survey surveillance system designed to identify and monitor selected maternal experiences and behaviors that occur before and during pregnancy and during the child's early infancy. PRAMS provides statewide estimates of selected perinatal health indicators that are representative of women who have recently delivered a live birth. PRAMS collects data through a mailed survey with telephone follow-up for non-respondents.



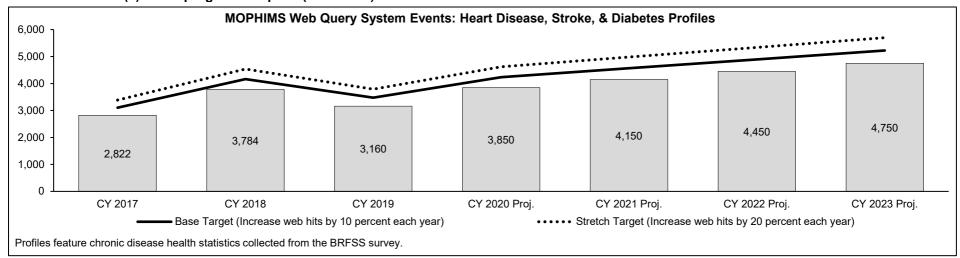
Department of Health and Senior Services

Health Information and Epidemiology

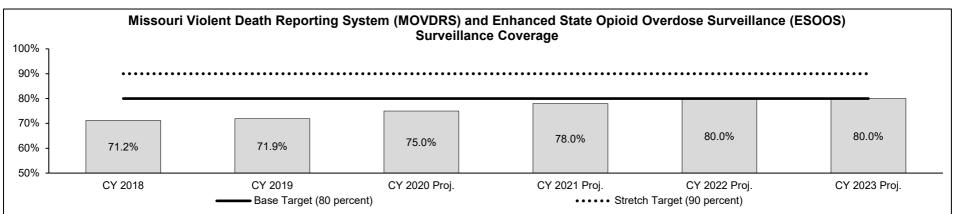
Program is found in the following core budget(s):

HB Section(s): 10.700, 10.710

2c. Provide a measure(s) of the program's impact. (continued)



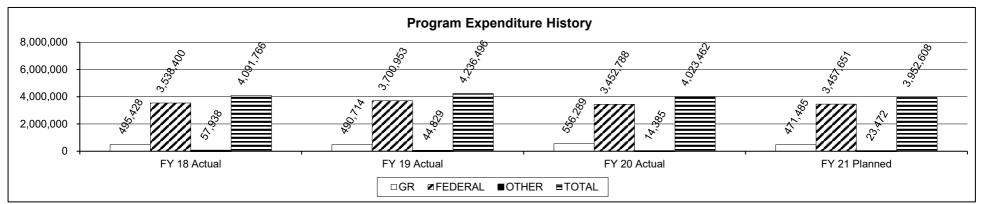
2d. Provide a measure(s) of the program's efficiency.



Note: The MOVDRS/ESOOS projects are ongoing, data surveillance programs that use Death Certificates, Patient Abstract System records, and county-level agency participation for the comprehensive tracking of both violent and opioid-related deaths as a percentage of the population. The goal of these programs is to build comprehensive databases that will provide a better understanding of the risk factors and circumstances surrounding violent and opioid-related deaths in order to assist prevention efforts in Missouri. Violent deaths are primarily homicides and suicides while opioid-related overdoses include any fatal drug overdose where an opioid was identified as contributing to the death.

Department of Health and Senior Services	HB Section(s): 10.700, 10.710
Health Information and Epidemiology	· · · · · · · · · · · · · · · · · · ·
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other" funds?

Health Initiatives (0275), Missouri Public Health Services (0298), and Department of Health and Senior Services Document Services (0646).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 188.052, 188.055, 192.020, 192.025, 192.040, 192.050, 192.060, 192.067, 192.068, 192.080, 192.323, 192.650-657, 192.665-192.667, 192.735-192.739, 193.005-325, and 260.391.1(2). Behavioral Risk Factor Surveillance System: 42 USC Section 301 (a)317(k); Missouri Cancer Registry Cancer Information System: Section 192.650-657, RSMo, PL 102-515; Pregnancy Risk Assessment Monitoring System: CDC-RFA-DP06-002; Maternal and Child Health Title V Block Grant: Social Security Act, Title V, Sections 501-510 (USC 701-710, Subchapter V, Chapter 7, Title 42); and National Violent Death Reporting System: CDC-RFA-CE16-1607.

6. Are there federal matching requirements? If yes, please explain.

Yes, the Cancer Registry grant requires one dollar of in-kind match from reporting facilities and the University of Missouri for every three dollars of federal funds and requires maintenance of effort. The MCH Title V Block Grant supports portions of the Office of Epidemiology and requires a three dollar non-federal/four dollar federal match and maintenance of effort.

7. Is this a federally mandated program? If yes, please explain.

Yes, the Cancer Registry is federally mandated (Cancer Registries Amendment Act: PL 102-515).

Health and Senior Services

HIV. STI. and Hepatitis (HSH)

HB Section(s): 10.700, 10.710

Program is found in the following core budget(s):

	DCPH Program Operations	DCPH Programs and Contracts	TOTAL
GR	803,911	5,266,969	6,070,880
FEDERAL	2,137,002	76,398,675	78,535,677
OTHER	10,799	0	10,799
TOTAL	2,951,712	81,665,644	84,617,356

1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need and Enhance access to care.

1b. What does this program do?

This program provides HIV, sexually transmitted infection (STI), and viral hepatitis education to the general public, those at risk for infection, and clinical providers; access to HIV, STI, and viral hepatitis prevention and testing services; increased access to HIV, STI, and viral hepatitis care and treatment; and a coordinated and efficient use of limited HIV, STI, and viral hepatitis resources to protect health and keep people safe. These outcomes are achieved through the following activities:

- Educating Missourians regarding HIV, STI, and hepatitis prevention, education, testing, and linkage to care services to stop the spread of infection, prevent re-infection, and prevent poor health outcomes.
- Providing screening and testing resources for specific, disproportionately affected populations who are underinsured or uninsured. Priority populations vary by condition and are based on epidemiological data and grant priorities.
- Delivering services in collaboration with local public health agencies, as well as a network of prevention contractors and testing program partner sites to ensure access to services throughout the state.
- Providing disease information, risk reduction counseling, and partner services (including elicitation of sex/needle sharing partners and confidential notification of exposed partners to offer counseling, testing, and referral for treatment and care).
- Providing access to HIV medical care, medication, and related services for low income Missourians living with HIV to improve individual health outcomes as well, as to reduce HIV transmission rates. Individuals living with HIV for whom the virus is well controlled by HIV medications pose essentially no risk of transmitting the virus through sexual contact.
- Facilitating the coordination and collaboration among statewide HIV, STI, and hepatitis service providers and stakeholders to determine program priorities and ensure efficient use of limited resources based on historical epidemiological data and emerging trends.

Health and Senior Services

HIV, STI, and Hepatitis (HSH)

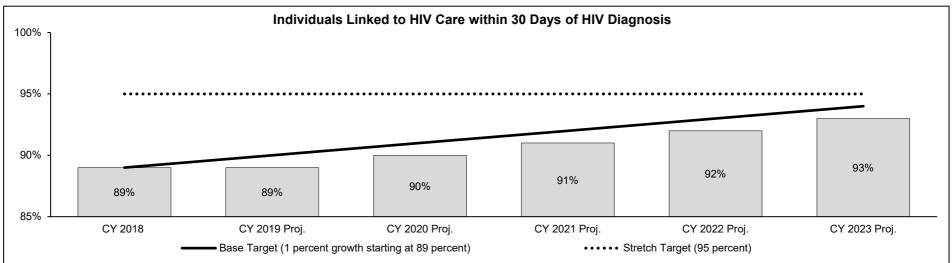
HB Section(s): 10.700, 10.710

Program is found in the following core budget(s):

2a. Provide an activity measure(s) for the program.

HIV, STD, and Hepatitis Clients Served								
Program/Service	CY 2018	CY 2019	CY 2020 Proj.	CY 2021 Proj.	CY 2022 Proj.	CY 2023 Proj.		
HIV Care Program Clients Served	8,343	8,575	8,600	8,625	8,650	8,650		
HIV Tests	84,327	82,844	85,000	85,000	85,000	85,000		
Hepatitis C Rapid Tests	3,955	3,389	3,500	3,500	3,500	3,500		
Gonorrhea/Chlamydia Tests	57,680	60,369	55,000	55,000	55,000	55,000		
Syphilis Tests	30,408	30,986	30,000	30,000	30,000	30,000		
Individuals Receiving Partner Services	3,938	4,511	3,900	3,900	3,900	3,900		
Condoms Distributed	323,970	412,609	415,000	430,000	430,000	430,000		
STI Medications Distributed (for the treatment of Gonorrhea, Chlamydia, or Syphilis infection; units represent one pill, vial, or shot)	74,970	73,767	69,000	74,000	74,000	74,000		

2b. Provide a measure(s) of the program's quality.



Linkage to care is a primary goal of the HIV partner services and HIV case management programs, because individual health and prevention outcomes are associated with linkage to care within 30 days of HIV diagnosis.

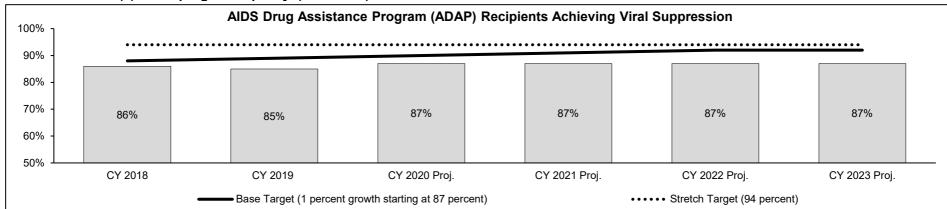
Health and Senior Services

HB Section(s): 10.700, 10.710

HIV, STI, and Hepatitis (HSH)

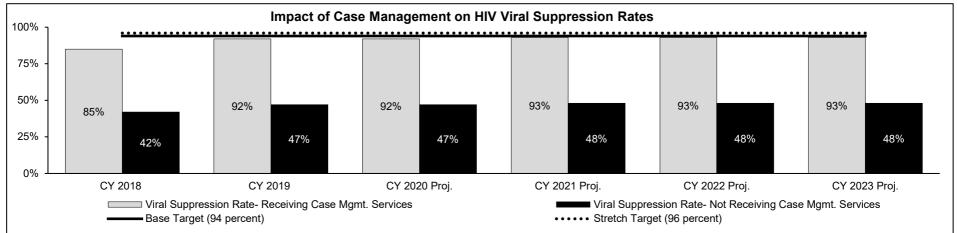
Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality. (continued)

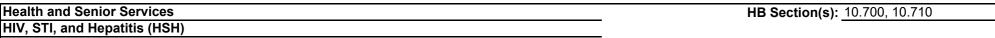


Viral suppression is an important clinical marker used to monitor HIV disease progression and response to antiretroviral treatment. According to CDC, getting and keeping an undetectable viral load is the best thing people with HIV can do to stay healthy. Another benefit of reducing the amount of virus in the body is that it helps prevent transmission to others through sex or syringe sharing, and from mother to child during pregnancy, birth, and breastfeeding.

2c. Provide a measure(s) of the program's impact.

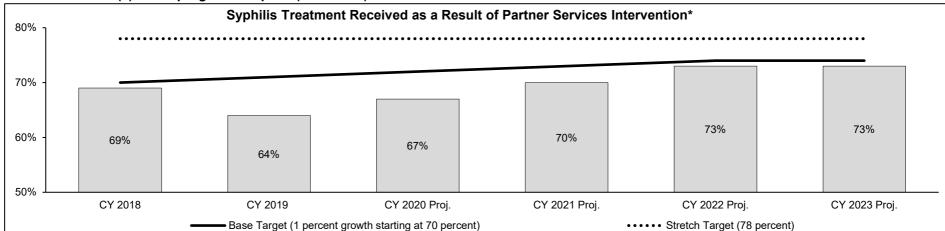


Viral suppression is an important clinical marker used to monitor HIV disease progression and response to antiretroviral treatment. Individuals living with HIV who maintain viral suppression stay healthier, live longer, and have effectively no risk of transmitting the virus to an HIV-negative partner through sexual contact. Case management services significantly increase viral suppression rates among Missourians living with HIV.

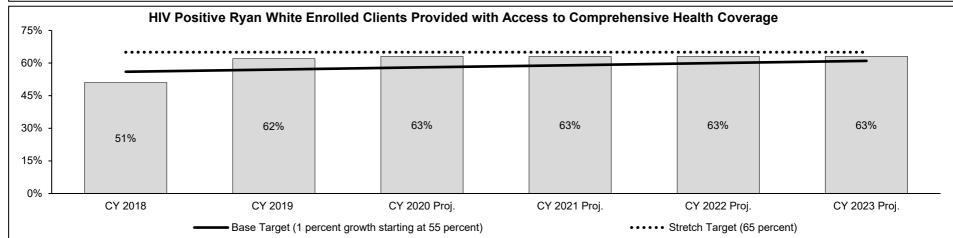


Program is found in the following core budget(s):

2c. Provide a measure(s) of the program's impact. (continued)



*This indicator shows the percentage of people infected with or exposed to syphilis who received treatment as a direct result of disease intervention activities by the Department. Connecting individuals to treatment helps control the infection in the community and prevents further damage to the individual's health.



By providing access to comprehensive health coverage (private insurance), Missouri's Ryan White program is able to ensure that people living with HIV have access to a full range of essential health benefits at a cumulative cost savings to the Ryan White program. Comprehensive health coverage provides access to health services that are not available to uninsured Ryan White clients including inpatient care, emergency department care, and management of some chronic or co-occurring conditions.

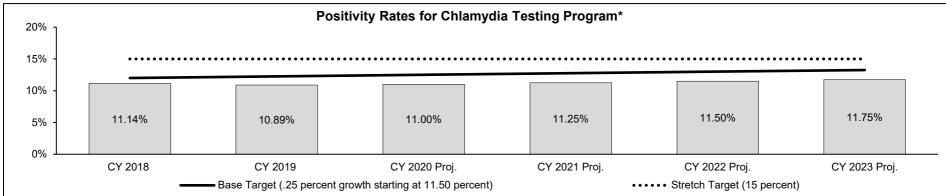
Health and Senior Services

HIV, STI, and Hepatitis (HSH)

Program is found in the following core budget(s):

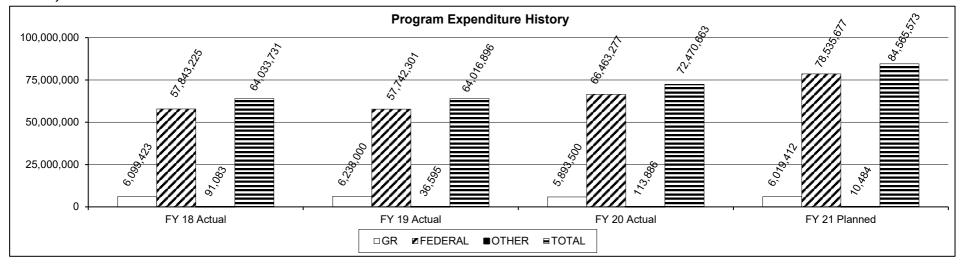
HB Section(s): 10.700, 10.710

2d. Provide a measure(s) of the program's efficiency.



*Chlamydia testing focuses on those who are most at-risk for infection, including those with no signs or symptoms. High testing positivity rates indicate that the testing program is effectively targeted to those individuals who are most at risk for infection rather than using limited resources to test individuals with low or no risk of infection. Prior CDC cooperative agreements recommended a testing program positivity rate of three percent. Missouri's testing program currently exceeds this target, and continues to work to identify individuals and populations who are at increased risk for infection.

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



Health and Senior Services	HB Section(s): 10.700, 10.710
HIV, STI, and Hepatitis (HSH)	

Program is found in the following core budget(s):

4. What are the sources of the "Other" funds?

Federal funds consist of Department of Health and Senior Services Federal (0143) and Department of Health and Senior Services Federal Stimulus (2350). Other funds consist of Health Initiatives (0275).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 191.653, 191.656, and 191.677, RSMo; Public Law 111-87 (Ryan White HIV/AIDS Treatment Extension Act of 2009); and Acquired Immune Deficiency Syndrome (AIDS) Housing Opportunity Act, 42 USC Section 12901.

6. Are there federal matching requirements? If yes, please explain.

Yes, the Ryan White grant requires a one dollar state match for every two dollars of Ryan White Part B Base and ADAP funding. No match is required for Ryan White Supplemental or other sources of funding for the HIV, STI, and Hepatitis Program.

7. Is this a federally mandated program? If yes, please explain.

No.

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58584C
Section for Women's Health		
Core-Women's Health Initiatives	HB Section	10.720

1. CORE FINANCIAL SUMMARY

	FY 2022 Budget Request					FY 2022 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Fed	Other	Total	
PS	59,863	1,681,674	0	1,741,537	PS	0	0	0		
EE	0	232,921	4,916	237,837	EE	0	0	0		
PSD	551,546	7,746,297	52,548	8,350,391	PSD	0	0	0		
TRF	0	0	0	0	TRF	0	0	0		
Total	611,409	9,660,892	57,464	10,329,765	Total	0	0	0		
FTE	1.14	30.58	0.00	31.72	FTE	0.00	0.00	0.00	0.	
Est. Fringe	35,841	986,558	0	1,022,400	Est. Fringe	0	0	0		
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Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

Other Funds: Health Initiatives (0275), Missouri Public Health Services (0298), and Department of Health and Senior Services-Donated (0658).

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

2. CORE DESCRIPTION

Women's Health Initiatives is coordinating programs and activities across the state to assist women, infants, children, young adults and families by providing free breast and cervical cancer screening (Show Me Healthy Women); providing cardiovascular and stroke prevention screenings (WISEWOMAN); providing evidence-based sexual violence prevention education through implementation of the Green Dot Violence Prevention program; analyzing causes of maternal deaths and developing interventions to prevent such deaths (Pregnancy Associated Mortality Review); providing case management, education, and awareness for hepatitis B (HBV), including information on disease transmission, disease process, diagnosis, and treatment to clinical and social service providers, infected/affected individuals, and the general public to ensure infants born to HBV positive women receive timely and complete vaccination in order to prevent infection. This program also administers the Maternal Child Health (MCH) Program which contracts with the LPHAs to support a leadership role for LPHAs to build community-based systems and expand the resources those systems can use to respond to priority health issues, assures access to quality MCH services, reduces health disparities, and promotes health for infants, children, adolescents, and women of child-bearing age. It administers the Child Care Health Consultation Program (CCHC) to enhance child care health and safety practices and provide outreach to child care providers; and protects and improves the health of Missouri's families through the Title V MCH Services Block Grant program by providing a variety of services, programs, and initiatives in collaboration with local public health agencies and other entities catering to the needs of MCH populations in the state.

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CORE DECISION ITEM

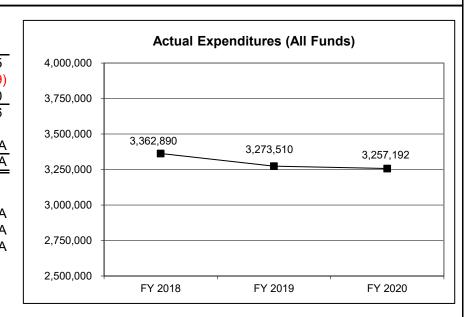
Health and Senior Services	Budget Unit	58584C
Section for Women's Health		
Core-Women's Health Initiatives	HB Section	10.720

3. PROGRAM LISTING (list programs included in this core funding)

Women's Health Initiatives Show-Me Healthy Women and WISEWOMAN

4. FINANCIAL HISTORY

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	3,795,976	3,799,969	3,812,435	10,329,765
Less Reverted (All Funds)	(15,012)	(15,012)	(15,012)	(18,489)
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	3,780,964	3,784,957	3,797,423	10,311,276
Actual Expenditures (All Funds)	3,362,890	3,273,510	3,257,192	N/A
Unexpended (All Funds)	418,074	511,447	540,231	N/A
Unexpended, by Fund: General Revenue Federal Other	0 394,868 23,206	0 499,174 12,273	14,751 494,541 30,939	N/A N/A N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: Prior to FY 2021, the Women's Health Initiatives expenditures were in the DCPH Program and Contracts Core and the Office on Women's Health Core. The actual expenditures reflected above are limited to only that of the previous office on Women's Health and Show Me Healthy Women/WISEWOMEAN cores.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVIN WOMENS HEALTH INITIATIVES

	397,625,01	797 [°] L9	768'099'6	604,116	27.1E	Total			
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planned expenditures.									
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	397,628,01	797 [°] L9	Z68'099'6	604,119	27.12	IstoT			
	166,036,8	842,524	762,847,7	979,133	00.0	DD			
	758,752	916'₺	136,252	0	00.0	33			
	763,147,1	0	749°189°1	298'69	31.12	Sd			
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Explanation	IstoT	Other	Federal	ЯЭ	314	Budget Class	-		
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PROGRAM-SPECIFIC			-		-		-	
33 - JATOT	41,002	00.0	0	00.0	0	0.00	0	00.0
EXPENSE & EQUIPMENT DHSS-FEDERAL AND OTHER FUNDS	41,000	00.0	0	00.0	0	00.0	0	00.0
29 - JATOT	384,765	84.7	0	00.0	0	0.00	0	00.0
PERSONAL SERVICES DHSS-FEDERAL AND OTHER FUNDS	384,765	84.7	0	00.0	0	00.0	0	00.0
СОКЕ								
SHOW-ME HEALTHY WOMEN								
Fund	DOLLAR	ЭТЯ	DOLLAR	ЭТЯ	DOLLAR	ЭТЯ	СОГЛШИ	СОГЛИИ
Budget Object Summary	AUTOA	AUTDA	BUDGET	BUDGET	DEPT REQ	DEPT REQ	SECURED	SECNEED
Decision Item	FY 2020	EA 2020	FY 2021	FY 2021	EA 2022	FY 2022	******	******
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PROGRAM-SPECIFIC								
33 - JATOT	0	00.0	788,762	00.0	788,782	00.0	0	00.0
HEALTH INITIATIVES	0	00.0	916'7	00.0	916'7	00.0	0	00.0
EXPENSE & EQUIPMENT DHSS-FEDERAL AND OTHER FUNDS	0	00.0	136,322	00.0	132,921	00.0	0	00.0
29 - JATOT	0	00.0	753,147,1	31.72	1,741,537	31.12	0	00.0
DHSS-FEDERAL AND OTHER FUNDS	0	00.0	749,188,1	30.58	749,188,1	30.58	0	00.0
GENEKAL REVENUE	0	00.0	698,65	わじし	£98'6 <u>9</u>	カ し"し	0	00.0
PERSONAL SERVICES								
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Budget Object Summary	AUTDA	AUTOA	BUDGET	BUDGET	DEPT REQ	DEPT REQ	SECURED	SECNBED
Decision Item	EA 2020	E A 50 50	FY 2021	FY 2021	FY 2022	FY 2022	*****	******
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JATOT GNARD

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DEPT OF HEALTH-DONATED

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DHSS-FEDERAL AND OTHER FUNDS

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DECISION ITEM SUMMARY

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Budget Unit

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DECISION ITEM DETAIL

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EX 2022

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								COKE
								SHOW-ME HEALTHY WOMEN

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BUDGET

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BUDGET

FY 2021

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Budget Object Class

Decision Item

Budget Unit

DECISION ITEM DETAIL

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DEPT REQ

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00.0	0	00.1	Z88,87	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM MANAGER
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00.0	0	0.00	0	2.00	134,478	0.00	0	HEALTH & SENIOR SVCS MANAGER 1
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00.0	0	0.00	0	2.00	110,246	0.00	0	PROGRAM COORD DMH DOHSS
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00.0	0	00.0	0	2.00	124,810	00.0	0	HEALTH PROGRAM REP III
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00.0	0	00.0	0	00.1	28,820	00.0	0	SR OFFICE SUPPORT ASSISTANT
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								СОВЕ
								WOMENS HEALTH INITIATIVES

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BUDGET

FY 2021

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Budget Object Class

Decision Item

Budget Unit

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DECISION ITEM DETAIL

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00.0	0	00.0	166,036,8	00.0	195,035,8	00.0	0	PROGRAM DISTRIBUTIONS
00.0	0	00.0	788,782	0.00	788,782	00.0	0	33 - JATOT
00.0	0	00.0	900'₺	00.0	900'₺	00.0	0	MISCELLANEOUS EXPENSES
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								СОКЕ
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СОГЛШИ	СОГЛШИ	3T7	ВОГГАК	3T7	DOLLAR	ЭТЯ	DOLLAR	Budget Object Class
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EX 2022

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Budget Unit

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DECISION ITEM DETAIL

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00.0	0	00.0	0	00.0	0	00.0	1 71,18	PROFESSIONAL SERVICES
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СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	Budget Object Class
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OTHER FUNDS

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Health and Senior Services

Show-Me Healthy Women and WISEWOMAN

HB Section(s): 10.700, 10.720

Program is found in the following core budget(s):

	DCPH Program Operations	Women's Health Initiatives		TOTAL
GR	0	500,000		500,000
FEDERAL	0	2,297,772		2,297,772
OTHER	15,010	52,548		67,558
TOTAL	15,010	2,850,320		2,865,330

1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need and Enhance access to care.

1b. What does this program do?

The Show-Me Heathy Women and WISEWOMAN programs contract with public and private health care providers in 90 counties and the City of St. Louis to determine client eligibility to receive early detection of breast and cervical cancer, heart disease, and stroke prevention services. These programs also process provider claims and oversee service providers through quality assurance monitoring. Services provided by these programs include: examination by a health care provider; screening mammograms; pap smears; diagnostic testing; case management; transportation for women to their screenings; and public education regarding the importance of screenings for breast cancer, cervical cancer, heart disease, and stroke.

2a. Provide an activity measure(s) for the program.

	FY 2018	FY 2019	FY 2020 Proj.	FY 2021 Proj.	FY 2022 Proj.	FY 2023 Proj.
Number of women screened/served for breast and cervical cancer	8,093	7,686	6,367*	7,890	7,788	7,839
Number of women screened for heart disease and stroke through the WISEWOMAN program	1,875	771**	647***	1,200	1,600	2,000
Provider Claims Processed	16,028	12,352	13,074	13,818	13,081	13,324

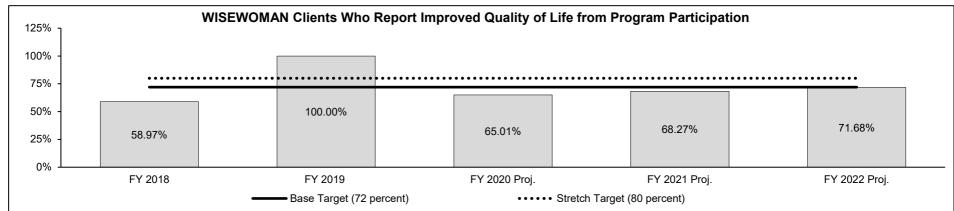
^{*}As a result of COVID-19, SMHW Providers were closed and unable to provide screening for a partial year.

^{*}The WISEWOMAN Program did not operate for an entire year. Numbers reflect an April 1, 2019, start date to a September 29, 2019, end date.

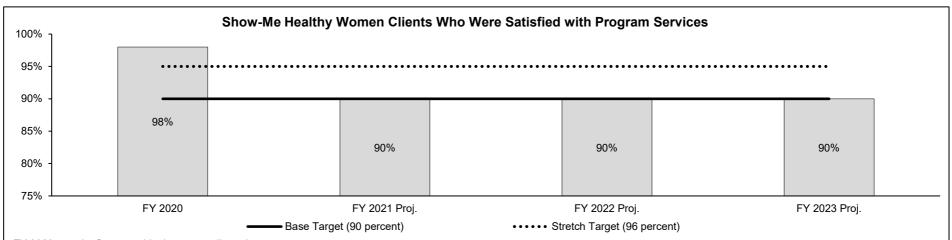
^{***}Data available November 2020.

Health and Senior Services	HB Section(s): 10.700, 10.720
Show-Me Healthy Women and WISEWOMAN	
Program is found in the following core budget(s):	

2b. Provide a measure(s) of the program's quality.



Note: DHSS received a limited sample of responses to the 2019 survey, resulting in a limited data set. Although the received responses were highly positive, the department would not expect that future iterations of the survey would be as uniform.



FY 2020 was the first year this data was collected.

Note: DHSS received a limited sample of responses to the inaugural 2020 survey, resulting in a limited data set. Although the received responses were highly positive, the department would not expect that future iterations of the survey would be as uniform.

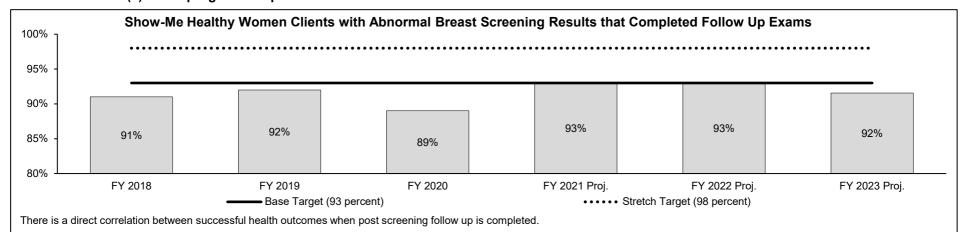
Health and Senior Services

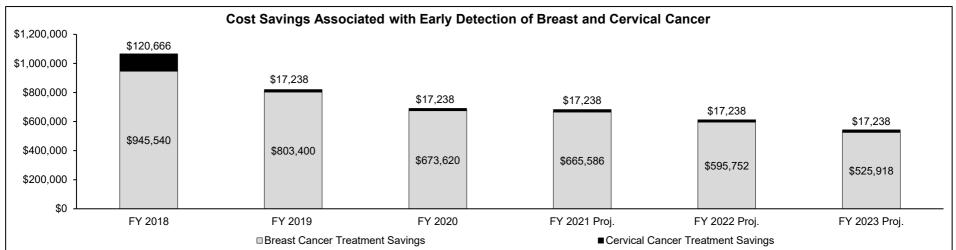
Show-Me Healthy Women and WISEWOMAN

Program is found in the following core budget(s):

HB Section(s): 10.700, 10.720

2c. Provide a measure(s) of the program's impact.

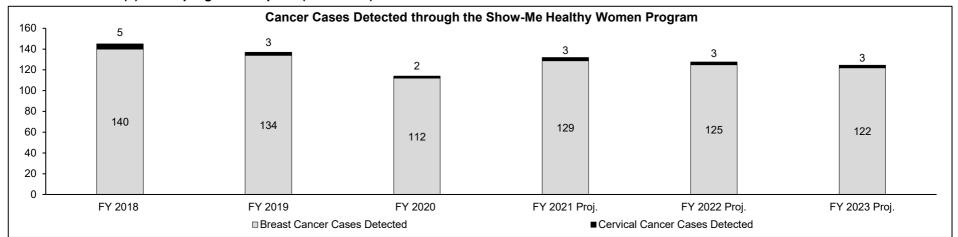




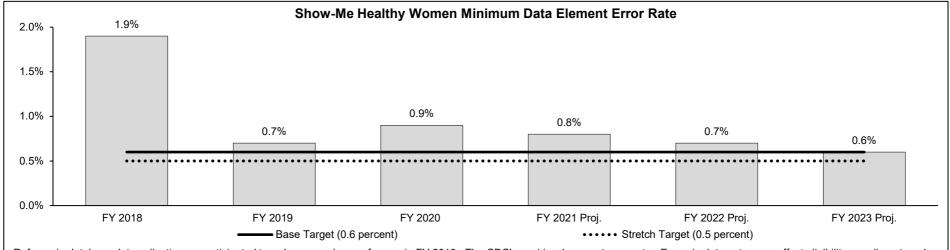
Detecting and treating breast and cervical cancers at an early stage saves lives. Early detection also results in savings related to treatment of the cancer. Per the source below, it is estimated treatment costs savings associated with screening (on average per case for all stages of detection) is \$6,180 for breast cancer and \$17,238 for cervical cancer. Source: Kakushadze, Zura; Raghubanshi, Rakesh; Yu, Willie, Estimating Cost Savings from Early Cancer Diagnosis. Data 2017, 2, 30; doi:10.3390/data2030030, published online by MDPI. https://res.mdpi.com/data/data-02-00030-v2.pdf?filename=&attachment=1

Health and Senior Services	HB Section(s): 10.700, 10.720
Show-Me Healthy Women and WISEWOMAN	
Program is found in the following core budget(s):	

2c. Provide a measure(s) of the program's impact. (continued)



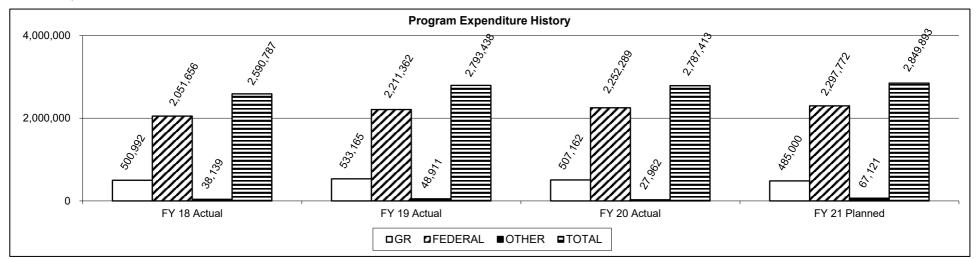
2d. Provide a measure(s) of the program's efficiency.



Reforms in database data collection are anticipated to reduce prevalence of errors in FY 2019. The CDC's goal is <1 percent error rate. Errors in data entry may affect eligibility, enrollment, and timely processing of provider payments.

Health and Senior Services	HB Section(s): 10.700, 10.720
Show-Me Healthy Women and WISEWOMAN	
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other" funds?

Missouri Public Health Services (0298) and Department of Health and Senior Services - Donated (0658).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Breast and Cervical Cancer Mortality Prevention Act of 1990, PL.354, 42 USC Section 247b(k)(2).

6. Are there federal matching requirements? If yes, please explain.

The Show-Me Healthy Women program requires a one dollar non-federal, three dollar federal match and maintenance of effort. WISEWOMAN program requires a one dollar non-federal, three dollar federal match.

7. Is this a federally mandated program? If yes, please explain.

No.

Health and Senior Services		HB Section(s): 10.720		
Women's Health In	itiatives		-	·
Program is found i	n the following core budget(s	s):	-	
	Women's Health Initiatives			TOTAL
GR	111,409			111,409
FEDERAL	7,363,120			7,363,120
OTHER	4,916			4,916
TOTAL	7,479,445			7,479,445

1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need and Enhance access to care.

1b. What does this program do?

Women's Health Initiatives protects and improves the health of women, infants, children, young adults, and families by coordinating programs and activities across the state. These programs and activities include:

- Analyzing causes of maternal deaths and developing interventions to prevent such deaths through Pregnancy Associated Mortality Reviews.
- Providing case management, education, and awareness for hepatitis B (HBV), including information on disease transmission, disease process, diagnosis, and treatment, to clinical and social service providers, infected/affected individuals, and the general public to ensure infants born to HBV positive women receive timely and complete vaccination to prevent infection;
- Managing the Sexual Violence Prevention program by contracting with public universities and non-profit organizations to provide evidence-based sexual violence prevention education to students, teachers, staff, and parents through implementation of the Green Dot Violence Prevention Strategy;
- Administering the Maternal Child Health (MCH) Program by contracting with local public health agencies (LPHAs) to support their leadership role in building and expanding community-based systems to respond to priority health issues, ensure access to quality MCH services, reduce health disparities, and promote health for infants, children, adolescents, and women of child-bearing age;
- Administering the Child Care Health Consultation (CCHC) Program by contracting with LPHAs to enhance child care health and safety practices by providing training and consultation to child care providers and health promotion services to children in child care across the state;
- Collaborating with other DHSS programs, LPHAs, and external public health partners to offer a variety of services, programs, and initiatives to meet the needs of Missouri MCH populations. These services can be broadly grouped into three categories: preventive/primary care services for all pregnant women, mothers, and infants up to age one; preventive and primary care services for all children; and services for children and youth with special health care needs (CYSHCN).

Health and Senior Services HB Section(s): 10.720

Women's Health Initiatives Program is found in the following core budget(s):

2a. Provide an activity measure(s) for the program.

	FFY 2018	FFY 2019	FFY 2020	FFY 2021 Proj.	FFY 2022 Proj.	FFY 2023 Proj.
LPHA's Served Through MCH Services	113	113	113	113	114	114
LPHA's Served Through CCHC Contracts	101	98	99	100	101	101
Individuals Served by Title V*	122,209	125,887	125,917	125,917	125,917	125,917
*Direct & Enghling Services Only - Does not include Public Health Services and Systems						

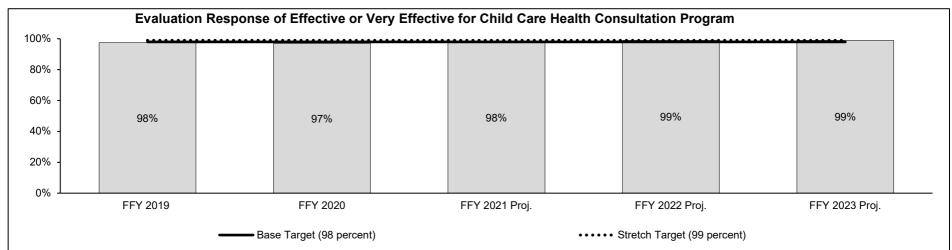
	FY 2017	FY 2018	FY 2019 Proj.	FY 2020 Proj.	FY 2021 Proj.	FY 2022 Proj.
Trainings Provided by Contracted Entities Implementing Green Dot	530	570	650	650	650	650
Individuals Served by HBV Case Management	139	101	120	120	120	120

Populations Served by Contracts of the Child Care Health Consultant Program							
FY 2018 FY 2019 FY 2020 FY 2021 FY 2022 FY 2023							
Facilities Served	5,715	5,831	5,735	5,750	5,780	5,800	
Child Care Providers Served	13,139	14,618	13,250	13,330	13,410	13,425	
Children Served	37,456	44,058	37,500	37,540	37,600	37,650	

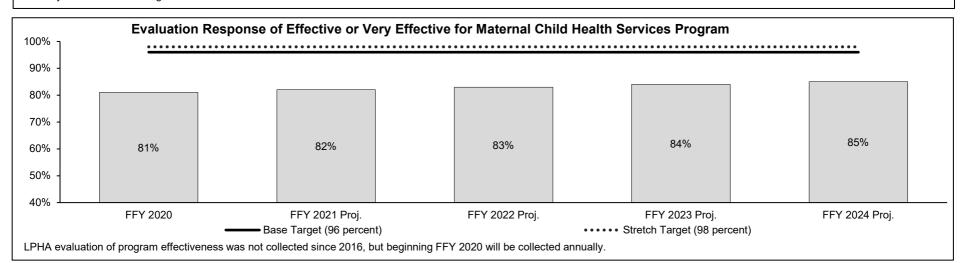
Services Provided by Contracts of the Child Care Health Consultant Program							
FY 2018 FY 2019 FY 2020 FY 2021 FY 2022 FY 2023 Proj. Proj. Proj.							
Specialized Consultation (hours)	531	756	615	621	627	632	
Health Issue Trainings for Child Care Providers (hours)	1,824	2,188	2,353	2,376	2,400	2,405	
Technical Consultation (units)	522	583	596	602	608	613	
Health Promotions for Children (units)	2,659	2,142	2,798	2,825	2,853	2,858	

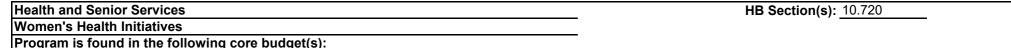
Health and Senior Services	HB Section(s): 10.720
Women's Health Initiatives	
Program is found in the following core budget(s):	

2b. Provide a measure(s) of the program's quality (continued).

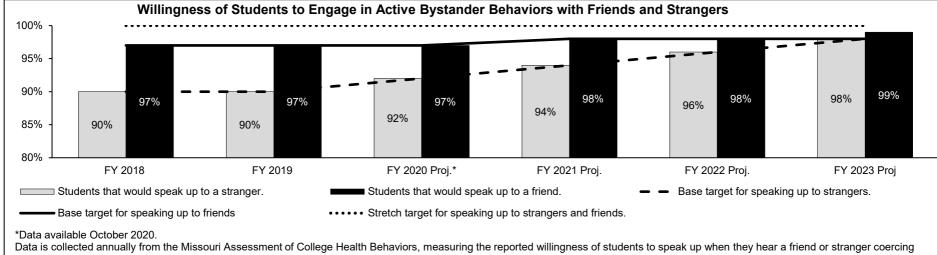


LPHA evaluation of program effectiveness has been collected annually starting in FFY 2019. Effectiveness was measured by percentage of respondents who indicated the program was "Effective" or "Very Effective" in meeting the contractors' needs.

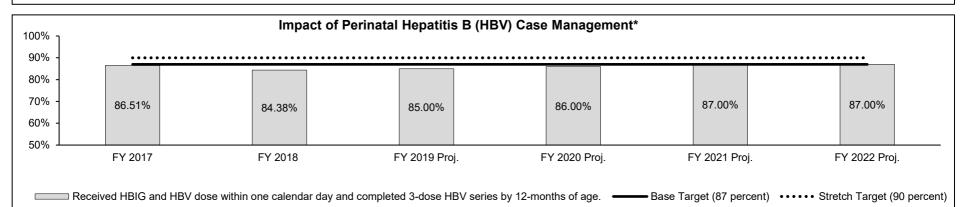




Provide a measure(s) of the program's impact.



someone to have sex.



*Perinatal HBV case management increases the likelihood that babies who are born to HBV positive mothers are vaccinated for HBV at birth and receive the full three month dose HBV Series by 12 months of age. Receipt of the full HBV series ensures HBV immunity among most vaccinated babies and decrees the likelihood of associated negative health outcomes including chronic HBV infection and liver disease. Approximately 120 infants are served by Missouri's perinatal HBV case management program each year.

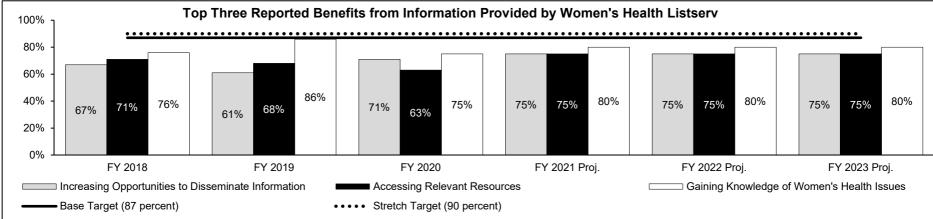
Health and Senior Services

Women's Health Initiatives

HB Section(s): 10.720

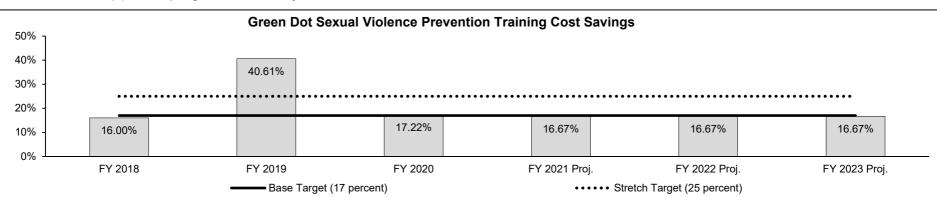
Program is found in the following core budget(s):

2c. Provide a measure(s) of the program's impact. (continued)



The Women's Health Listserv provides women's health information, resources, and opportunities to interested individuals such as local public health staff, nurses, physicians, educators, and other health professionals. Data is collected from an annual survey of all Listserv members.

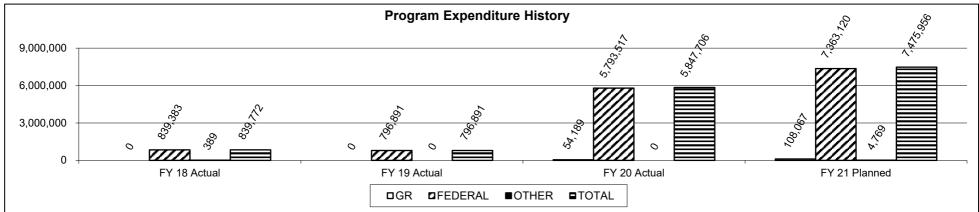
2d. Provide a measure(s) of the program's efficiency.



Cost savings are achieved through contracting with an organization to come to Missouri to provide training, rather than paying for trainees to travel to other states to receive the training, and cost savings are achieved by having more people trained in-state. In FY 2019, DHSS offered a new focus area for the training and consequently saw an increase in attendees, thus increasing the cost savings. DHSS anticipates more consistent cost savings in future years as communities reach saturation.

Health and Senior Services	HB Section(s): 10.720
Women's Health Initiatives	
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



Prior to FY 2021, the Women's Health Initiatives expenditures were in the DCPH Program and Contracts Core and the Office on Women's Health Core. The actual expenditures reflected above are that of the previous Office on Women's Health.

4. What are the sources of the "Other " funds?

Health Initiatives (0275), Missouri Public Health Services (0298), and Department of Health and Senior Services Donated (0658).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Breast and Cervical Cancer Mortality Prevention Act of 1990, PL.354, 42 USC Section 247b(k)(2).

6. Are there federal matching requirements? If yes, please explain.

The MCH Services Block Grant requires a three dollar non-federal/four dollar federal match and maintenance of effort.

7. Is this a federally mandated program? If yes, please explain.

No.

Health and Sen				_	Budget Unit	58581C			
Core - Extended	d Public Health d Women's Healt	h Services			HB Section	10.725			
1. CORE FINAN	NCIAL SUMMARY	'							
		FY 2022 Budge	et Request			FY 202	2 Governor's	Recommendat	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	6,289,091	5,282,836	0	11,571,927	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	6,289,091	5,282,836	0	11,571,927	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
	udgeted in House DT, Highway Patro	•	•	s budgeted	_	s budgeted in Hous DOT, Highway Pat	•	•	es budgeted

2. CORE DESCRIPTION

This core funding request is for family planning and family planning-related services, pregnancy testing, sexually transmitted disease testing and treatment, including pap tests and pelvic exams, and follow-up services for eligible women.

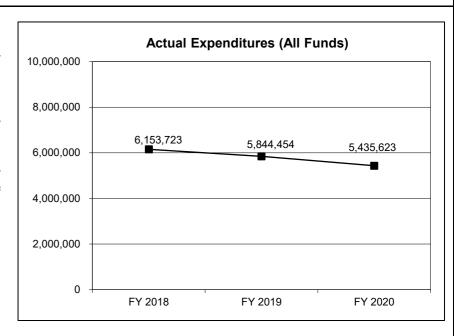
3. PROGRAM LISTING (list programs included in this core funding)

Extended Women's Health Services

Health and Senior Services	Budget Unit	58581C
Community and Public Health		
Core - Extended Women's Health Services	HB Section	10.725

4. FINANCIAL HISTORY

_	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	6,153,723	6,424,459	6,289,091	11,571,927
Less Reverted (All Funds)	0	0	0	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	6,153,723	6,424,459	6,289,091	11,571,927
Actual Expenditures (All Funds)	6,153,723	5,844,454	5,435,623	N/A
Unexpended (All Funds)	0	580,005	853,468	N/A
Unexpended, by Fund: General Revenue Federal Other	0 0 0	580,005 0 0	853,468 0 0	N/A N/A N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

WOMEN'S HEALTH & SENIOR SERVING MOMEN'S HEALTH SRVC

	Total	00.0	160,682,8	5,282,836		6'149'11 O	
							-
	ВD	00.0	160,682,6	5,282,836		3°129°11 0	
GOVERNOR'S RECOMMENDED (SORE						
	Total	00.0	160,682,6	5,282,836		6,178,11, 0	= 4
		00.0	160,682,8	5,282,836		3'149'11 0	
DEPARTMENT CORE REQUEST							
	IstoT	00.0	re0,e82,a	9:837839		6'149'11 O	=
	DD	00.0	160,682,8	5,282,836		3'lZ9'll 0	
ZEOTEV RETER VETOES							
	Budget Class	3T4	ЯЭ	Federal	Other	IstoT	Explanation
2. CORE RECONCILIATION DETA	71						

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126,178,11\$

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00.0	0	00.0	726,178,11	00.0	726,178,11	00.0	5,435,623	GG - JATOT
00.0	0	00.0	6,289,091 6,282,836	00.0 00.0	160,882,8 858,282,8	00.0	\$59,354,8 0	DH2S-FEDERAL ARVC CORE PROGRAM-SPECIFIC WOMEN'S HEALTH SRVC
СОГЛШИ	СОГЛШИ	314	DOLLAR	314	ВОГГАК	314	ВОГГАК	Fund
геспи		рерт REQ	DEPT REQ	BUDGET	BUDGET	JAUTOA	AUTDA	Budget Object Summary
******	*******	FY 2022	FY 2022	FY 2021	FY 2021	E	FY 2020	Decision Item

126,178,11\$

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9/21/20 10:38

JATOT GNARD

Budget Unit

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00.0	0	00.0	476,178,11	00.0	476,178,11	00.0	6,435,623	G9 - JATOT
00.0	0	00.0	726,178,11	00.0	726,178,11	00.0	5,435,623	PROGRAM DISTRIBUTIONS
								СОВЕ
								WOMEN'S HEALTH SRVC
СОГЛИИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	ЭТЯ	DOLLAR	Budget Object Class
SECURED	SECNEED	DEPT REQ	рерт вед	BUDGET	BUDGET	AUTOA	AUTOA	Decision Item
******	******	FY 2022	FY 2022	FY 2021	FY 2021	上人 5050	FY 2020	Budget Unit

Page 29 of 81 Page 29 of 81 Page 20 of 81

Health and Sen	ior Services			HB Section(s): 10.725				
Extended Women's Health Services								
Program is four	nd in the following core bu	dget(s):						
	Women's Health Services						TOTAL	
GR	6,289,091						6,289,091	
FEDERAL	5,282,836						5,282,836	
OTHER	0						0	
TOTAL	11,571,927						11,571,927	

1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need and Enhance access to care.

1b. What does this program do?

The Extended Women's Health program provides funding for family planning and family planning-related services, pap tests and pelvic exams, pregnancy testing, sexually transmitted disease testing/treatment, and follow-up services for eligible women. This program also provides education and outreach to encourage eligible women to access the family planning services and family planning-related services offered. Eligible women include those with a family Modified Adjusted Gross Income for the household size that does not exceed 201 percent of the Federal Poverty Level, and uninsured women losing MO HealthNet coverage at the conclusion of 60 days postpartum for one additional year. Program services are intended to reduce the number of unintended pregnancies for eligible women and thereby reduce Medicaid expenditures. Unintended pregnancies, which account for nearly half (45 percent) of all pregnancies in the United States, are also associated with risks of other health issues such as low birth weight and maternal depression. The services provided by this program also assist women in preventing the spread of sexually transmitted infections.

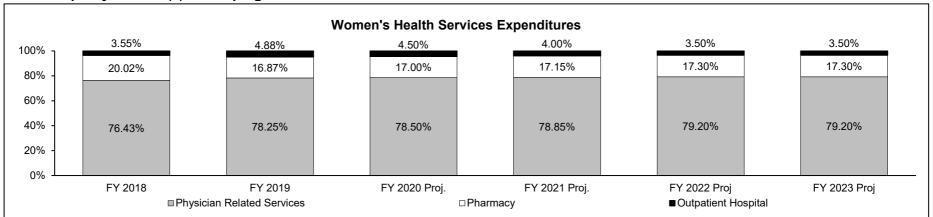
2a. Provide an activity measure(s) for the program.

Women's Health Services Enrollees Average Monthly Number									
FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023				
F1 2010		Proj.	Proj.	Proj.	Proj.				
64,627	54,978	66,160	66,160	66,160	66,160				

Women's Health Services Recipients						
	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023
	F1 2010	F1 2019	Proj.	Proj.	Proj.	Proj.
Outpatient Hospital	2,010	2,281	2,281	2,281	2,281	2,281
Pharmacy	25,715	22,565	22,565	22,565	22,565	22,565
Physician Services	49,606	44,899	44,899	44,899	44,899	44,899

Health and Senior Services	HB Section(s): 10.725
Extended Women's Health Services	
Program is found in the following core hudget(s):	

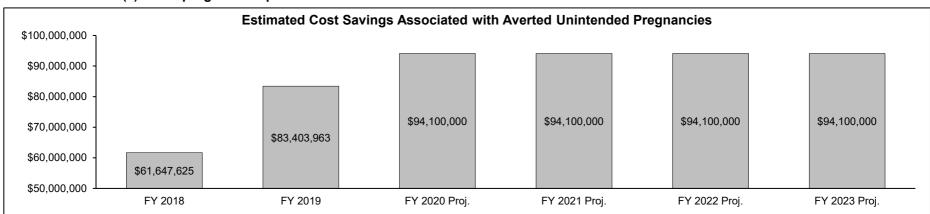
2b. Provide a quality measure(s) for the program.



Base Target - outpatient hospital services expenditures reach 3.5 percent or less. Stretch Target - outpatient hospital services expenditures reach 2.5 percent or less.

Lower percentages in outpatient hospital services expenditures indicate more preventative care is being utilized though physician related and pharmacy services.

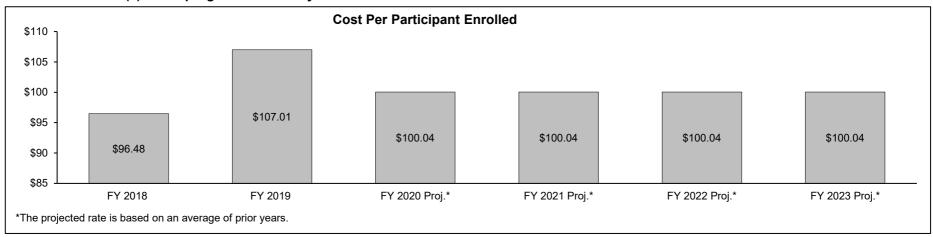
2c. Provide a measure(s) of the program's impact.



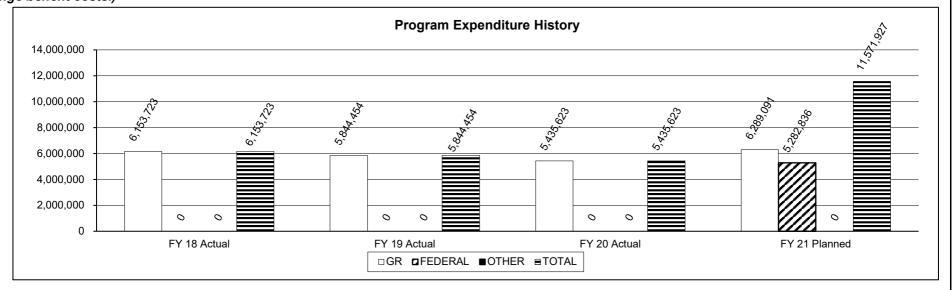
The cost savings is calculated by multiplying the number of averted unintended pregnancies by the MO HealthNet cost to provide pregnancy coverage only. The number of unintended pregnancies is calculated by utilizing the number of women receiving contraception services through this program and multiplying that by a percentage of unintended pregnancies that result in an unplanned birth, as referenced in a 2015 study by the Guttmacher Institute regarding Publicly Funded Contraceptive Services at U.S. Clinics.

Health and Senior Services	HB Section(s): 10.725
Extended Women's Health Services	<u></u>
Program is found in the following core budget(s):	

2d. Provide a measure(s) of the program's efficiency.



3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



Н	Health and Senior Services	HB Section(s): 10.725				
E	Extended Women's Health Services	· , <u>———</u>				
Pı	Program is found in the following core budget(s):					
4.	4. What are the sources of the "Other " funds?					
	Not applicable.					
5.	5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include	le the federal program number, if applicable.)				
	Sections 208.040, 208.151 and 208.659, RSMo.					
6.	6. Are there federal matching requirements? If yes, please explain.					
	No.					
7.	7. Is this a federally mandated program? If yes, please explain.					
	No.					

Health and Senior Services

Community and Public Health

Core - Nutrition Services

Budget Unit 58590C, 58600C, 58610C

10.735

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 2022 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Fed	Other	Total	
PS	0	0	0	0	PS	0	0	0	0	
EE	0	1,679,921	0	1,679,921	EE	0	0	0	0	
PSD	0	370,000,930	0	370,000,930	PSD	0	0	0	0	
TRF	0	0	0	0	TRF	0	0	0	0	
Total	0	371,680,851	0	371,680,851	Total	0	0	0	0	
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00	

Federal Funds: Department of Health and Senior Services Federal (0143) and Department of Health and Senior Services Federal Stimulus (2350).

| Est. Fringe | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation. | Est. Fringe | 0 | 0 | 0 | 0 | 0 | 0 | Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

2. CORE DESCRIPTION

This core funding is requested to support the Child and Adult Care Food Program (CACFP), the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), the Commodity Supplemental Food Program (CSFP), and the Summer Food Service Program (SFSP). This funding is essential to reducing preventable nutrition related illnesses and deaths, as well as increasing positive health outcomes. CACFP reimburses eligible providers for nutritious meals and snacks served to children and adults enrolled in day care centers, children enrolled in after-school enrichment programs, and children and disabled adults residing in emergency homeless shelters in order to improve nutrient intake and contribute to the development of healthy eating habits for these populations. WIC provides services such as health screening and risk assessment, nutrition counseling, breastfeeding promotion and support, and referrals that assure access to quality healthcare services. As a benefit for participating in the services as recommended by the nutritionist, WIC pays for nutritious foods to supplement the diets of pregnant, postpartum, and breastfeeding women, and infants and children up to their fifth birthday who qualify as nutritionally at-risk. CSFP provides a variety of nutritious food packages that are distributed to elderly qualified participants through the food bank network. SFSP reimburses eligible sponsoring organizations that provide meals to low-income children age 18 and under when school is not in session, thereby improving their nutrient intake, reducing their risk for nutritionally-related health problems, and enhancing their learning capabilities when they return to school.

Health and Senior Services

Community and Public Health

Budget Unit 58590C, 58600C, 58610C

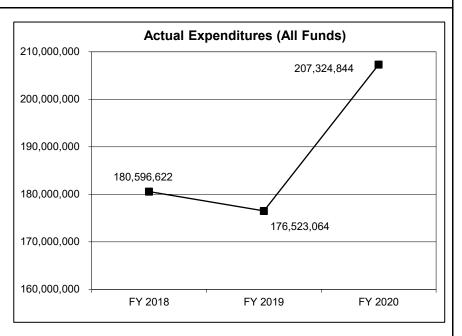
Core - Nutrition Services HB Section 10.735

3. PROGRAM LISTING (list programs included in this core funding)

Nutrition Initiatives

4. FINANCIAL HISTORY

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	194,680,851	194,680,851	224,742,916	371,680,851
Less Reverted (All Funds)	0	0	0	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	194,680,851	194,680,851	224,742,916	371,680,851
Actual Expenditures	180,596,622	176,523,064	207,324,844	N/A
Unexpended (All Funds)	14,084,229	18,157,787	17,418,072	N/A
Unexpended, by Fund:				
General Revenue	0	0	0	N/A
Federal	14,084,229	18,157,787	17,418,072	N/A
Other	0	0	0	N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

MIC SUPP FOOD DISTRIBUTION

5. CORE RECONCILIATION DETAIL

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286,265,063	0	286,265,063	0		00.0	ЬD			
1,679,921	0	126,978,1	0		0.00	33			
						SORE	IDED C	OMME	СОУЕРИОР'S REC
<u> </u>	0	786,44,984	0		00.0	Total			
286,265,063	0	286,265,063	0		00.0	БД			
1,679,921	0	126,978,1	0		0.00	33			
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(35,518)	0	(35,518)	0		00.0				Core Reallocation
						STN	JMTSU	JLQA 3	DEPARTMENT COR
<u> </u>	0	786 , 44 ,984	0		00.0	IstoT			
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654,317,1	0	1,715,439	0		00.0	33			
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3 lstoT	Other	Federal C		ВЭ	3T4	Budget Class			
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DEPARTMENT OF HEALTH & SENIOR SERVINCHILD & ADULT CARE FOOD PRGM

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						SORE	солевиов. В весоммение о
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	798,35,36	0	798,352,69	0	00.0		
							DEPARTMENT CORE REQUEST
	798,352,99	0	498,235,867	0	00.0	Total	
	798,35,867	0	798,352,69	0	00.0		
							TAFP AFTER VETOES
kplanation	E lstoT	Other	Federal	3	яэ этт	Budget Slass	
						٦	5. CORE RECONCILIATION DETAI

DEPARTMENT OF HEALTH & SENIOR SERVING SUMMER FOOD SVCS PROGRAM DIST

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ZEOTEV RETER VETOES									
	Budget Class	314	ЯЭ		Federal	Other		lstoT	noitsnation
5. CORE RECONCILIATION DETA	ור								

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DEPT REQ

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00.0	0	00.0	101,265,063	00.0	101,229,545	00.0	49 ۱ ,88۲ کا	PROGRAM-SPECIFIC DHSS-FEDERAL AND OTHER FUNDS
00.0	0	0.00	1,679,921	00.0	664,317,1	00.0	09Z,8T4,1	33 - JATOT
00.0	0	00.0	126,676,1	00.0	664,317,1	00.0	057,874,1	EXPENSE & EQUIPMENT DHSS-FEDERAL AND OTHER FUNDS
								COKE
								WIC SUPP FOOD DISTRIBUTION
СОГЛШИ	СОГЛШИ	3T7	ВОГГАВ	3T4	DOLLAR	3T7	DOLLAR	pun∃

BUDGET

FY 2021

AUTDA

EX 2020

AUTDA

FY 2020

DEPT REQ

LA 2022

BUDGET

FY 2021

9/21/20 10:38

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Budget Object Summary

Decision Item

Budget Unit

PROGRAM-SPECIFIC								
СОВЕ								
CHILD & ADULT CARE FOOD PRGM								
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Budget Object Summary	AUTOA	AUTDA	BUDGET	BUDGET	рерт кед	рерт кед	SECNKED	SECNBED
Decision Item	FY 2020	上人 2020	FY 2021	トン021	FY 2022	FY 2022	*****	*****
Budget Unit								

661,094,73\$	00.0	798,352,99\$	00.0	798,352,99\$	00.0	0\$	00.0
661,094,73	00.0	798,352,89	00.0	498,352,99	00.0	0	00.0
661,094,73	00.0	798,352,99	00.0	798,352,89	00.0	0	00.0
661,094,73	00.0	798,352,867	00.0	798,252,99	00.0	0	00.0
	661,034,73	00.0 661,034,73	788,852,88 00.0 661,084,72 788,852,88 00.0 661,084,72	00.0 788,285,38 00.0 661,084,72 00.0 788,285,88 00.0 661,084,72	788,852,88 00.0 788,852,88 00.0 601,094,72 788,852,88 00.0 788,852,88 00.0 601,094,72	00.0 788,852,88 00.0 788,852,88 00.0 661,094,72 00.0 788,852,88 00.0 661,094,72	0 00.0 788,852,88 00.0 788,852,88 00.0 788,852,88 00.0 661,094,72

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PROGRAM-SPECIFIC								
СОВЕ								
SUMMER FOOD SVCS PROGRAM DIST								
pun-l	DOLLAR	ЭТЭ	DOLLAR	3T7	DOLLAR	3T7	СОГЛШИ	СОГЛШИ
Budget Object Summary	AUTDA	AUTDA	BUDGET	BUDGET	DEPT REQ	DEPT REQ	SECURED	SECNKED
Decision Item	EA 2020	EA 2020	FY 2021	FY 2021	FY 2022	FY 2022	*****	*****
Budget Unit								

JATOT GRAND	829,185,363	00.0	41\200'009	00.0	\$۱۷٬۵09 و000	00.0	0\$	00.0
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DHSS-FEDERAL AND OTHER FUNDS

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								COKE
								WIC SUPP FOOD DISTRIBUTION
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Page 31 of 81 9/21/20 10:39

Budget Unit

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								СОКЕ
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СОГЛИИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	Budget Object Class
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******	******	FY 2022	FY 2022	FY 2021	FY 2021	E A 5050	E A 5050	Budget Unit

Page 32 of 81 | Page 32 of 81 | Page 32 of 81

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00.0	0	00.0	000'009'11	00.0	1۲,500,000	00.0	29,185,363	PROGRAM DISTRIBUTIONS
								СОКЕ
								SUMMER FOOD SVCS PROGRAM DIST
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	ЭТЯ	DOLLAR	3T7	DOLLAR	Budget Object Class
SECURED	SECURED	DEPT REQ	рерт кед	BUDGET	BUDGET	AUTOA	AUTDA	Decision Item
******	*****	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit

listebib_mi Page 33 of 81 9/21/20 10:39

Department of Health and Senior Services
Nutrition Initiatives Program
Program is found in the following core budget(s):

DCPH Program
Operations
Nutrition Services

HB Section(s): 10.700, 10.735

HB Section(s): 10.700, 10.735

TOTAL

	Operations	Nutrition Services			TOTAL
GR	0	0			0
FEDERAL	3,458,180	176,392,185			179,850,365
OTHER	0	0			0
TOTAL	3,458,180	176,392,185			179,850,365

1a. What strategic priority does this program address?

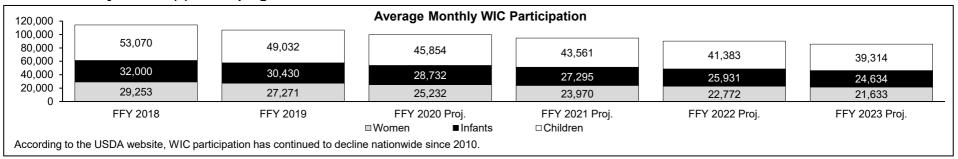
Improve the health and safety of Missourians most in need.

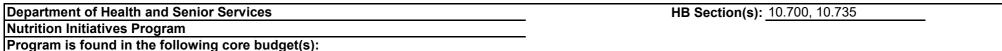
1b. What does this program do?

The Nutrition Initiatives Program implements services and activities that increase access to healthy, nutritious food, which in turn reduces preventable nutrition-related illnesses and deaths, and increases positive health outcomes for eligible Missourians.

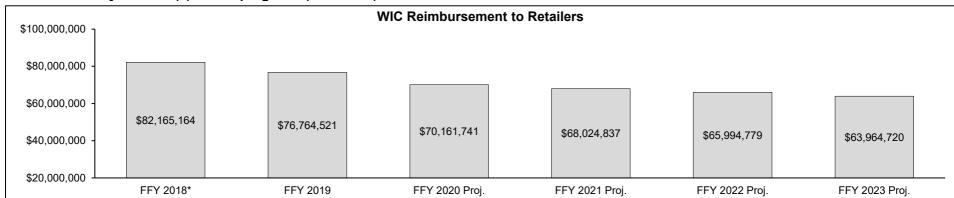
- · Specific programs include:
 - The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) provides supplemental nutritious foods, nutrition education, breastfeeding promotion and support, and referrals to health and other social services for low-income pregnant, breastfeeding, and postpartum women, and to infants and children up to age five who are found to be at nutritional risk;
 - The Child and Adult Care Food Program (CACFP) improves the nutritional health of children and adults in child care centers, family child care homes, adult day care facilities, emergency/homeless shelters, and afterschool programs;
 - The Summer Food Service Program (SFSP) assures that low-income children continue to receive nutritious meals when school is not in session; and
 - The Commodity Supplemental Food Program (CSFP) improves the nutrient intake needed for adults age 60 and older by providing commodity food with additional sources of iron, calcium, protein, and vitamins A and C.

2a. Provide an activity measure(s) for the program.





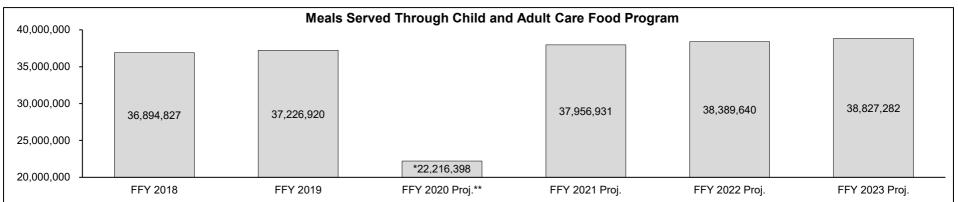
2a. Provide an activity measure(s) for the program. (continued)



*In prior years the source of this data was The Integrity Profile (TIP). Beginning in FFY 2019, the source of the data is the FNS-798 report, with amounts for breast pump purchases and direct ship formula removed, as these are not paid to retailers. FFY 2018 data has been adjusted accordingly.

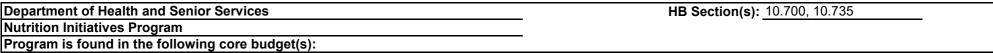
Future reimbursement will be impacted by fluctuation in food item costs, participation rates, and percent of redemption changes, which will be affected by the electronic benefit transfer (eWIC).

Future reimbursement will be impacted by fluctuation in food item costs, participation rates, and percent of redemption changes, which will be affected by the electronic benefit transfer (eWIC) technology implemented in FFY 2020.

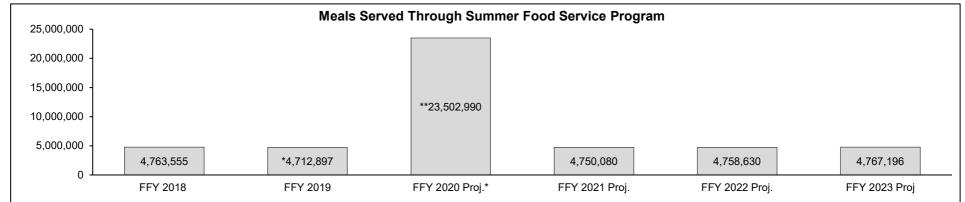


^{*}Significant decline projected due to COVID-19.

The Child and Adult Care Food Program serves children ages 18 and under enrolled in care programs; children under age 18 enrolled in afterschool programs in at-risk areas or residing in emergency shelters with their families; children and adults with physical or mental disabilities; and children ages 15 and under who are children of migrant workers.



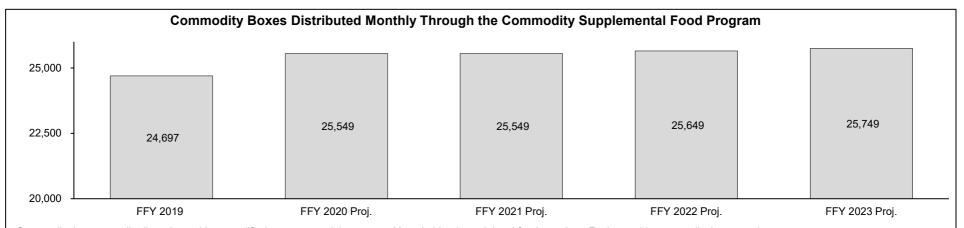
2a. Provide an activity measure(s) for the program. (continued)



*Data available November 2020. Due to school budget constraints, fewer schools held summer school programs which reduced the number of meals served.

**Due to COVID-19 emergency meal service, projected meals served increased exponentially.

The Summer Food Service Program serves children aged 18 and under and physically or mentally disabled adults who participate in school-sponsored programs during the school year.



Commodity boxes are distributed monthly to qualified program participants age 60 and older through local food pantries. Each monthly commodity box contains: fruits and juices; dry cereal, farina, rolled oats, or grits; proteins (canned beef, chicken, beef stew, chili, tuna, or salmon); milk (UHT shelf stable or instant nonfat dry); peanut butter/dry beans; potatoes, pasta, or rice; cheese; and vegetables. USDA decreased the amount of commodity boxes that several states received in FFY 2019 in order to provide commodity boxes to a new state joining the program. All 50 states are now a part of the program; therefore, new program additions should not affect the number of boxes Missouri receives in the future.

Department of Health and Senior Services

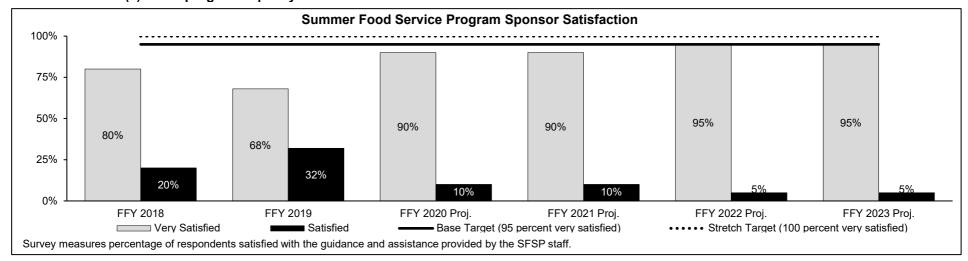
Nutrition Initiatives Program

Program is found in the following core budget(s):

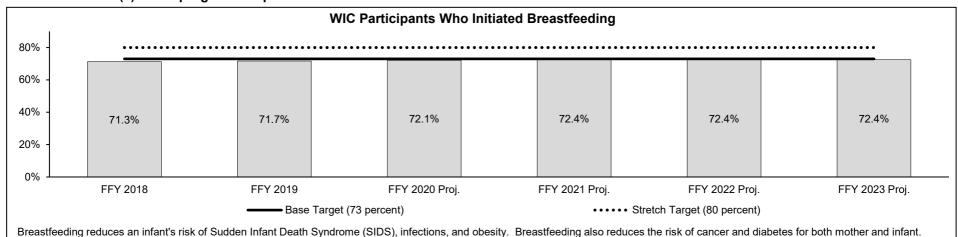
HB Section(s): 10.700, 10.735

HB Section(s): 10.700, 10.735

2b. Provide a measure(s) of the program's quality.

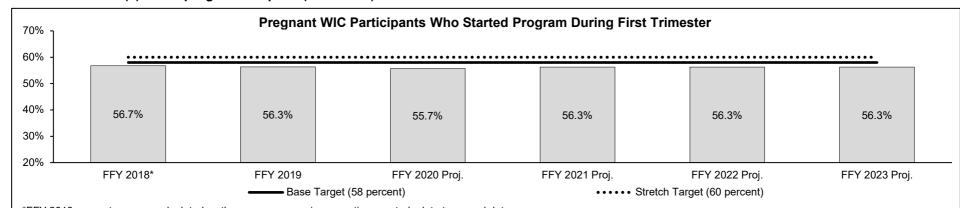


2c. Provide a measure(s) of the program's impact.



Department of Health and Senior Services	HB Section(s): 10.700, 10.735
Nutrition Initiatives Program	<u></u>
Program is found in the following core budget(s):	

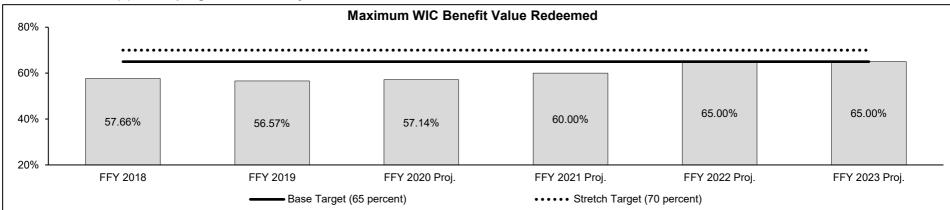
2c. Provide a measure(s) of the program's impact. (continued)



*FFY 2018 amounts were recalculated as there was an error in converting quarterly data to annual data.

Pregnant mothers receiving WIC benefits during the first trimester reduces the mother's risk of preterm delivery and infant mortality. Numbers reflect the percentage of women who enroll in WIC during the first trimester out of all pregnant women enrolled in WIC. National average is 52.5 percent, according to the 2018 USDA WIC Participant and Program Characteristics Report.

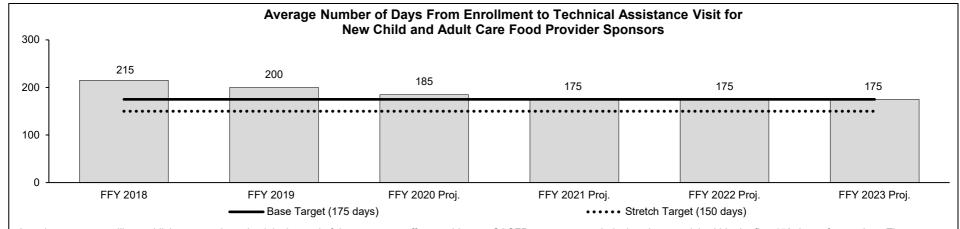
2d. Provide a measure(s) of the program's efficiency.



WIC benefits transitioned from being issued via paper checks to electronic benefit transfer (EBT) in FFY 2020. The paper check process created some barriers to redemption of benefits, thereby resulting in fewer nutritional resources being distributed to eligible mothers and children. WIC anticipates that EBT benefit issuance should result in increasing the benefits redeemed over a period of time.

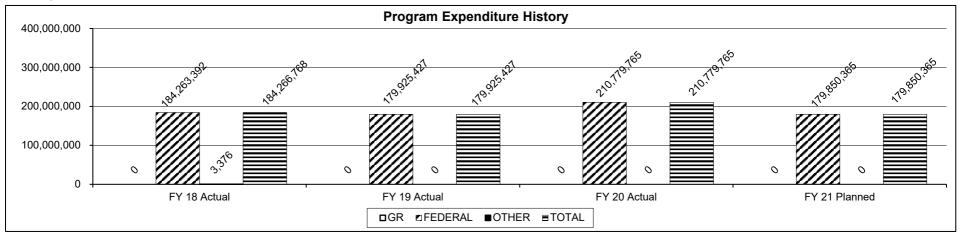
Department of Health and Senior Services	HB Section(s): 10.700, 10.735
Nutrition Initiatives Program	<u></u>
Program is found in the following core budget(s):	

2d. Provide a measure(s) of the program's efficiency. (continued)



In order to more readily establish program integrity, it is the goal of the program staff to provide new CACFP sponsors a technical assistance visit within the first 150 days of operation. These technical assistance visits are the most beneficial when sponsors have submitted at least three monthly claims; therefore, a visit should not be completed any earlier than 125 days.

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



Department of Health and Senior Services	HB Section(s): 10.700, 10.735
Nutrition Initiatives Program	· · · · · · · · · · · · · · · · · · ·
Program is found in the following core budget(s):	

4. What are the sources of the "Other " funds?

Federal funds consist of Department of Health and Senior Services Federal (0143) and Department of Health and Senior Services Federal Stimulus (2350). Other funds consist of Department of Health and Senior Services - Donated (0658).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

WIC: Child Nutrition Act of 1966, 42 U.S. Code Sections 1771, 1786, Healthy, Hunger-Free Kids Act of 2010; CACFP: Richard B Russell National School Lunch Act, 42 U.S. Code 1766, Section 17; Section 210.251, RSMo; SFSP: Richard B Russell National School Lunch Act, 42 U.S. Code 1761, Section 13; Section 191.810, RSMo; and CSFP: Farm Security and Rural Investment Act of 2002, 7 U.S. Code 612c; Section 208.603, RSMo.

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

Yes, these programs are required to be administered in every state and are 100 percent federally funded.

Health and Senior Services	Budget Unit	58022C, 58023C
Office of Rural Health and Primary Care	-	
Core - Office of Rural Health and Primary Care	HB Section	10.730, 10.740
	<u>-</u>	

1. CORE FINANCIAL SUMMARY

	FY 2022 Budget Request					FY 2022 Governor's Recommendation					
	GR	Federal	Other	Total		GR	Fed	Other	Total		
PS	0	818,948	181,745	1,000,693	PS	0	0	0	0		
EE	0	379,581	77,692	457,273	EE	0	0	0	0		
PSD	200,000	1,242,797	600,658	2,043,455	PSD	0	0	0	0		
TRF	0	0	0	0	TRF	0	0	0	0		
Total	200,000	2,441,326	860,095	3,501,421	Total	0	0	0	0		
FTE	0.00	11.20	4.00	15.20	FTE	0.00	0.00	0.00	0.00		
Est. Fringe	0	428,573	116,386	544,959	Est. Fringe	0	0	0	0		
Note: Fringes bu	dgeted in House	Bill 5 except for	certain fringes	budgeted	Note: Fringes be	udgeted in Hous	se Bill 5 except	for certain fring	es budgeted		

directly to MoDOT, Highway Patrol, and Conservation.

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

Federal Funds: Department of Health and Senior Services Federal (0143) and Department of Health and Senior Services Federal Stimulus (2350).
Other Funds: Health Initiatives (0275), Professional and Practical Nursing Student Loan (0565), and Department of Health and Senior Services - Donated (0658).

2. CORE DESCRIPTION

The Office of Rural Health and Primary Care (ORHPC) is composed of the State Office of Rural Health, the Primary Care Office, and the Office of Dental Health.

The State Office of Rural Health provides leadership in the development and coordination of rural health initiatives. The Office is a central resource of information and education related to rural health to support, strengthen, and improve rural health care.

The Primary Care Office evaluates the availability of medical, dental, and behavioral health professionals; develops and expands community-based health systems in areas with a shortage of health professionals; and assists in the recruitment and retention of health professionals into areas with a shortage of health professionals.

The Office of Dental Health provides a broad range of core dental public health activities including surveillance, education, and support for the provision of preventive services to improve the oral health of Missourians.

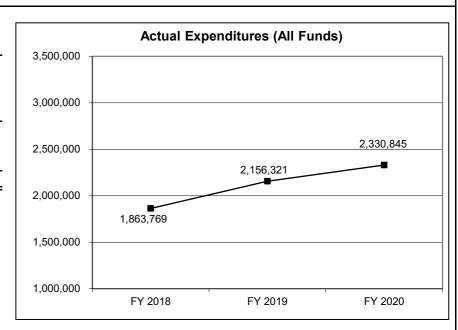
Health and Senior Services	Budget Unit	58022C, 58023C
Office of Rural Health and Primary Care		
Core - Office of Rural Health and Primary Care	HB Section	10.730, 10.740
	-	<u> </u>

3. PROGRAM LISTING (list programs included in this core funding)

Office of Dental Health Primary Care Office State Office of Rural Health

4. FINANCIAL HISTORY

_	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.	
Appropriation (All Funds)	2,430,372	3,269,924	7,986,415	7,551,421	
Less Reverted (All Funds)	(3,371)	(9,392)	(9,458)	(9,502)	
Less Restricted (All Funds)		0	0	0	
Budget Authority (All Funds)	2,427,001	3,260,532	7,976,957	7,541,919	
Actual Expenditures (All Funds)	1,863,769	2,156,321	2,330,845	N/A	
Unexpended (All Funds)	563,232	1,104,211	5,646,112	N/A	
Unexpended, by Fund: General Revenue Federal Other	0 341,859 221,373	0 600,678 503,533	0 5,047,028 599,084	N/A N/A N/A	



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

Health and Senio			D	4.0	Budget Unit	58120C, 58130C	, 58140C		
PRIMO Program Core - PRIMO Pr		nt Loan and Lo	oan Kepaymer	it Programs	HB Section	10.745			
1. CORE FINANC	CIAL SUMMARY	/							
		FY 2022 Budge	et Request			FY 202	2 Governor's	Recommendat	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	378,750	425,000	2,256,790	3,060,540	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	378,750	425,000	2,256,790	3,060,540	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes but directly to MoDO				budgeted	_	budgeted in Hous OT, Highway Pat	•	-	es budgeted

Other Funds: Health Access Incentives (0276), Professional and Practical Nursing Student Loan (0565), and Department of Health and Senior Services-Donated (0658).

2. CORE DESCRIPTION

The Primary Care Resource Initiative for Missouri (PRIMO) addresses the needs of areas with a shortage of health professionals by assisting in the development and expansion of community-based health systems that provide medical, dental, and behavioral health services; working with federal, state, and local partners in the recruitment and retention of health care professionals in shortage areas; and providing forgivable student loans to health care professional students who agree to work within the shortage areas.

The Missouri Professional and Practical Nursing Student Loan and Loan Repayment Program provides forgivable student loans to nursing students in exchange for service in designated underserved communities and/or facilities that are experiencing nursing shortages upon completion of training. The program also provides loan repayment to practicing nurses in exchange for service in communities and/or facilities that are experiencing nursing shortages.

The Health Professional Loan and Health Professional Student Loan Repayment Program provides educational loan repayment to practicing primary care medical and dental health professionals in exchange for service in areas with a shortage of primary care medical and dental professionals.

Health and Senior Services

PRIMO Program, Nursing Student Loan and Loan Repayment Programs

Budget Unit 58120C, 58130C, 58140C

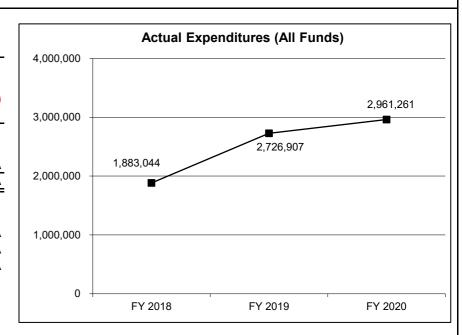
Core - PRIMO Program HB Section 10.745

3. PROGRAM LISTING (list programs included in this core funding)

Health Professional Loan Repayment Program
Missouri Professional and Practical Nursing Student Loan and Loan Repayment Program
PRIMO Program

4. FINANCIAL HISTORY

_	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.	
Appropriation (All Funds)	2,530,434	2,930,434	3,131,542	3,310,292	
Less Reverted (All Funds)	0	(15,000)	(15,000)	(11,363)	
Less Restricted (All Funds)		0	(121,250)	0	
Budget Authority (All Funds)	2,530,434	2,915,434	2,995,292	3,298,929	
Actual Expenditures (All Funds)	1,883,044	2,726,907	2,961,261	N/A	
Unexpended (All Funds)	647,390	188,527	34,031	N/A	
Unexpended, by Fund: General Revenue Federal Other	500,000 0 147,390	0 0 188,527	0 0 34,031	N/A N/A N/A	



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

DEPARTMENT OF HEALTH & SENIOR SERVINOWH AND OPCRH

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	1,000,693	347,181	818,948	0		15.20	Sd			
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DI - Rural Health Improvement										
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OWH AND OPCRH S. SENIOR SERVI

1,843,455 899'009 1,242,797 00.0 ЬD 0 33 457,273 74,692 186,675 0 00.0 **GOVERNOR'S RECOMMENDED CORE** Explanation Total Other **TTE** Class Federal СК Budget 5. CORE RECONCILIATION DETAIL

2,441,326

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15.20

Total

3,301,421

960'098

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	IstoT	00.0	200,000	0	0	200,000	
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DEPARTMENT CORE REQUEST							
	Total	00.0	200,000	0	0	200,000	
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TAFP AFTER VETOES							
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5. CORE RECONCILIATION DETA	ור						

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Total

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DEPARTMENT OF HEALTH & SENIOR SERVING PROGRAM

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BUDGET

FY 2021

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BUDGET

FY 2021

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EX 2020

Budget Object Summary

Decision Item

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СОГЛШИ	СОГЛШИ	ЭТЭ	DOLLAR	ЭТЯ	DOLLAR	3T4	DOLLAR	pun∃

BUDGET

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Budget Object Summary

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DECISION ITEM DETAIL

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Budget Object Class

Decision Item

Budget Unit

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00.0	0	00.0	1,213	00.0	2,219	00.0	919	MISCELLANEOUS EXPENSES
00.0	0	00.0	225	00.0	908	00.0	0	EQUIPMENT RENTALS & LEASES
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BUDGET

FY 2021

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OTHER FUNDS

Decision Item

Budget Unit

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00.0	0	00.0	0	00.0	0	00.0	118,550	33 - JATOT
00.0	0	00.0	0	00.0	0	00.0	118,550	PROFESSIONAL SERVICES
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******	*****	FY 2022	FY 2022	FY 2021	FY 2021	E A 50 50	FY 2020	Budget Unit

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OTHER FUNDS

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Page 39 of 81 Page 39 of 81

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СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	ЭТЯ	DOLLAR	Budget Object Class
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								СОВЕ
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СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	Budget Object Class
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OTHER FUNDS

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Department of Health and Senior Services

HB Section(s): 10.740, 10.745

Office of Rural Health and Primary Care and Primary Care Resource Initiative of Missouri

Program is found in the following core budget(s):

i rogram is round	a in the following core budget,	<i>3</i> j.		
	Office of Rural Health	PRIMO, Medical and		
	and Primary Care	Nurse Loan Program		TOTAL
GR	0	378,750		378,750
FEDERAL	1,413,432	425,000		1,838,432
OTHER	205,095	2,256,790		2,461,885
TOTAL	1,618,527	3,060,540		4,679,067

1a. What strategic priority does this program address?

Enhance access to care.

1b. What does this program do?

The Office of Rural Health and Primary Care (ORHPC) is comprised of the Primary Care Office (PCO) and the State Office of Rural Health (SORH).

- ORHPC provides funding and technical assistance efforts, such as community-based needs assessment; assists in the developing of viable primary care services in communities to increase access to healthcare services; assist rural providers, hospitals, and communities by operating as a clearinghouse of information and providing innovative approaches to rural health services delivery; and provides training opportunities as identified by the rural providers and communities.
- The **PCO** evaluates the availability of medical, dental, and behavioral health professionals; submits applications to Health Resources Services and Administration for Health Professional Shortage Areas; develops and expands community-based health systems in areas with a shortage of health professionals; and assists in the recruitment and retention of health professionals into Missouri shortage areas.
- The **SORH** provides leadership in the development and coordination of rural health initiatives to support, strengthen, and improve rural health care.
- The **Primary Care Resource Initiative of Missouri (PRIMO**) program addresses the needs of areas with a shortage of health professionals by assisting in the development and expansion of community-based health systems and by providing forgivable student loans to health care professional students who agree to work within shortage areas.
- The **Health Professional State Loan Repayment Program (SLRP)** provides educational loan repayment to practicing medical, dental health, and mental health professionals in exchange for service in Missouri areas with a shortage of health professionals.
- The Missouri Professional and Practical Nursing Student Loan (NSL) and Loan Repayment Program (NLRP) provides forgivable student loans to nursing students and licensed practicing nurses in exchange for nursing service in communities and/or facilities that are experiencing nursing shortages.

Department of Health and Senior Services

HB Section(s): 10.740, 10.745

Office of Rural Health and Primary Care and Primary Care Resource Initiative of Missouri

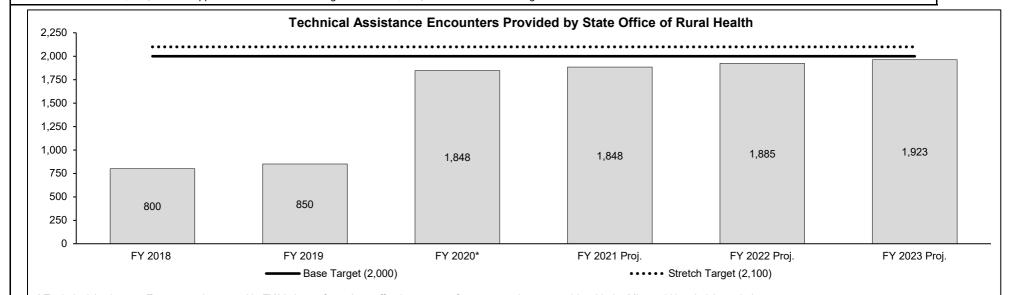
Program is found in the following core budget(s):

2a. Provide an activity measure(s) for the program.

-a. Trovido an douvis, moderació, for the programm		Nov. Avenda Day Figural Very											
		New Awards Per Fiscal Year											
	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023							
	F 1 2016	F1 2019	F 1 2020	Proj.	Proj.	Proj.							
PRIMO Student Loan Program*	12	7	7	10	10	10							
Nursing Student Loan Program (NSL)*	28	44	20	10	10	10							
Nursing Student Loan Repayment Program (NLRP)**	22	46	33	69	48	48							
Health Professional State Loan Repayment Program (SLRP)**	16	20	26	20	20	20							

^{*}Student Loan Program = current medical professional student; payments are applied to educational costs (tuition, etc.).

New Decision Item for \$400,000 was approved in the FY 2019 Budget. Included \$300,000 of one-time funding.



^{*} Technical Assistance Encounters increased in FY20 due to focus by staff to improve performance and a partnership with the Missouri Hospital Association. Technical Assistance includes site visits, trainings, webinars, grant application review, phone calls, invoice assistance, mail and email correspondence etc.

^{**}Repayment = medical professional has completed degree coursework; payments are to pay for loans previously received while in student status.

Department of Health and Senior Services

HB Section(s): 10.740, 10.745

Office of Rural Health and Primary Care and Primary Care Resource Initiative of Missouri

Program is found in the following core budget(s):

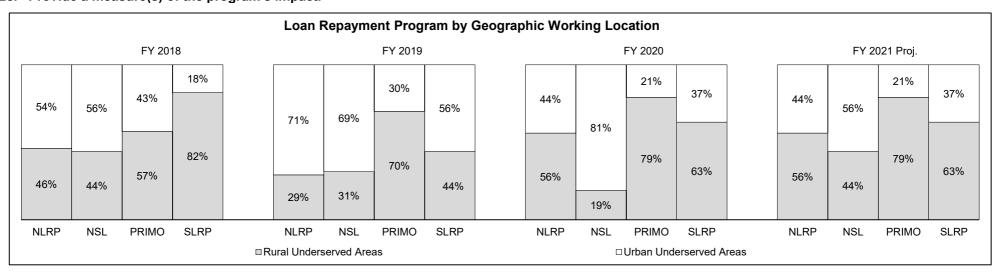
2b. Provide a measure(s) of the program's quality.

Retention Rate of PRIMO Student Loan Recipients

	Retention Rate of Frame Student Louis Recipients												
		FY 2019		FY 2020				FY 2021 Proj.	•		FY 2022 Proj.		
	Recipients that earned forgiveness	Recipients working beyond obligation	Retention Rate*	Recipients that earned forgiveness	Recipients working beyond obligation	Retention Rate*	Recipients that earned forgiveness	Recipients working beyond obligation	Retention Rate*	Recipients that earned forgiveness	Recipients working beyond obligation	Retention Rate*	
Physicians	2	2	100%	4	4	100%	4	4	100%	4	4	100%	
Dentists	1	1	100%	0	0	0%	2	2	100%	2	2	100%	
Dental Hygienists	0	0	0%	0	0	0%	0	0	0%	1	1	100%	
Behavioral	1	1	100%	0	0	0%	1	1	100%	1	1	100%	

^{*}Retention rate is based on the number of health professionals who stayed in health shortage areas beyond their obligation to provide services. Some PRIMO Student Loan Recipients receive up to 11 PRIMO loans while obtaining their undergraduate and medical school diplomas and for three years of residency. Each PRIMO loan is for one year only.

2c. Provide a measure(s) of the program's impact.



Department of Health and Senior Services HB Section(s): 10.740, 10.745 Office of Rural Health and Primary Care and Primary Care Resource Initiative of Missouri Program is found in the following core budget(s): 2c. Provide a measure(s) of the program's impact. (continued) **Primary Care Providers Receiving Loan Repayment** 80 70 60 50 40 69 30 48 48 46 20 33 26 22 10 20 20 20 20 16 0 FY 2018 FY 2019* FY 2020 FY 2021 Proj. FY 2022 Proj. FY 2023 Proj. ■ SLRP (Student Loan Repayment Program) ■ NLRP (Nurse Loan Repayment Program) *The NLRP received a one time \$300,000 and \$100,000 ongoing spending authority. NLRP is anticipated to award more loans in FY 2019 and forward. Reasons Clinicians Continue to Practice in Rural Areas FY 2020 100% 75% 50% 95% 91% 83% 78% 25% 0% I feel that I am doing important work. I fully value the mission of my practice My total compensation package, including I feel a sense of belonging to the community. benefits, is fair. Data for Clinician Satisfaction and Retention acquired from Practice Sights Retention Collaborative and Data Management System.

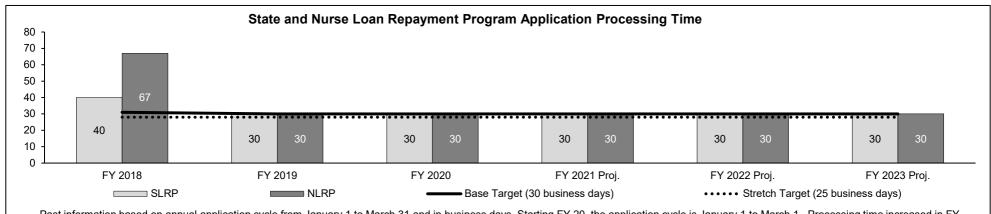
Department of Health and Senior Services

HB Section(s): 10.740, 10.745

Office of Rural Health and Primary Care and Primary Care Resource Initiative of Missouri

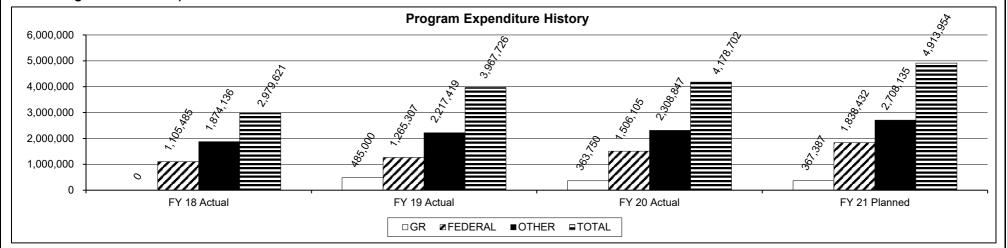
Program is found in the following core budget(s):

2d. Provide a measure(s) of the program's efficiency.



Past information based on annual application cycle from January 1 to March 31 and in business days. Starting FY 20, the application cycle is January 1 to March 1. Processing time increased in FY 2018 due to staff vacancy.

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



Department of Health and Senior Services

HB Section(s): 10.740, 10.745

Office of Rural Health and Primary Care and Primary Care Resource Initiative of Missouri

Program is found in the following core budget(s):

4. What are the sources of the "Other " funds?

Health Initiatives (0275), Health Access Incentive (0276), Professional and Practical Nursing Student Loan and Nurse Loan Repayment (0565), and Department of Health and Senior Services - Donated (0658).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Section 191.411, RSMo (PRIMO); Section 191.500, RSMo (Student Loans); Section 191.600, RSMo (Loan Repayment Program); Section 192.604, RSMo (Office of Rural Health); Section 335.212, RSMo (Nurse Loan Program); Section 335.245, RSMo (Nurse Loan Repayment Program); and Section 333(D), Public Health Service (PHS) Act (Primary Care Office).

6. Are there federal matching requirements? If yes, please explain.

Yes, the State Loan Repayment Program Grant requires one dollar of state funds for each dollar of federal funds. The State Office of Rural Health requires a three dollar state to one dollar federal match.

7. Is this a federally mandated program? If yes, please explain.

No.

Department of Health and Senior Services

Office of Dental Health
Program is found in the following core budget(s):

HB Section(s): 10.710, 10.730, 10.740

	Office of Dental Health	Donated Dental	Elks Mobile Dental Care		TOTAL
GR	0	90,000	200,000		290,000
FEDERAL	1,027,894	0	0		1,027,894
OTHER	655,000	0	0		655,000
TOTAL	1,682,894	90,000	200,000		1,972,894

1a. What strategic priority does this program address?

Enhance access to care and Improve the health and safety of Missourians most in need.

1b. What does this program do?

The Office of Dental Health provides education to the general public, dental and medical providers, public health officials, and decision-makers on a broad range of oral health topics. Topics include strategies to prevent dental problems, the consequences of poor oral health for an individual's overall health, and community water fluoridation. The Office does the following:

- operates the Preventive Services Program (PSP) and the Dental Sealant Program to deliver education and preventive measures to Missouri children;
- provides training and support for communities which choose to fluoridate their water;
- works with partners to advocate for increased access to dental care to prevent costly trips to the hospital and expensive dental restorations;
- coordinates with schools to recruit volunteer dentists, hygienists, and dental students to screen children during the PSP events. Children participating in PSP are screened to assess their dental health to see if treatment is necessary, and to evaluate the dental health of Missouri children. Volunteers apply the fluoride varnish as a part of the PSP event;
- coordinates General Revenue funds awarded to Truman Medical Center for the Elks Mobile Dental Program. This program provides dental care to people who may not have access to dental care;
- operates Missouri's grant, Improving Oral Health Outcomes, which hopes to increase Missouri's number of children with dental sealants, a known deterrent to
 dental decay and to increase the number of people being served by fluoridated community water systems, which is one of the most cost-effective ways to
 prevent tooth decay; and
- operates Missouri's grant, Support Oral Health Workforce Activities, which hopes to bring teledentistry services to people with limited access to dental care, and provide fluoride to high-risk children through the Local Public Health Agencies.

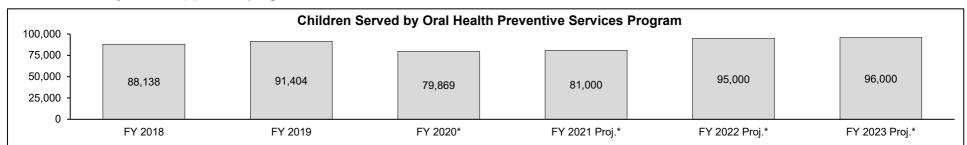
Department of Health and Senior Services

Office of Dental Health
Program is found in the following core budget(s):

HB Section(s): 10.710, 10.730, 10.740

HB Section(s): 10.710, 10.730, 10.740

2a. Provide an activity measure(s) for the program.

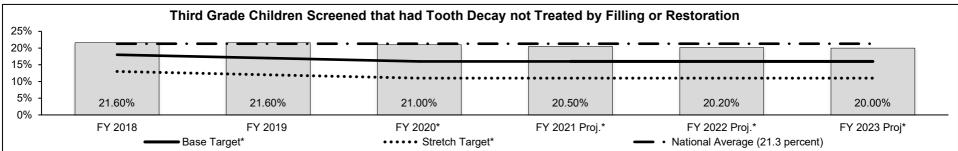


There were 659 schools that participated in the Preventive Services Program (PSP) for the 2019-2020 school year (FY 2020). Applying fluoride varnish to children's teeth is a preventive measure to decrease their chances of cavities and any further decay. *Access to schools stopped in March 2020 due to COVID-19.

2b. Provide a measure(s) of the program's quality.

Preventive Services Program (PSP) Events Survey (FY 2019)										
Volunteer Occupation	Felt Trained and	Felt PSP Events Were	Would Volunteer for							
Volunteer Occupation	Prepared for PSP Event	Well Organized	PSP Events in Future							
Dentist	100%	100%	100%							
Dental Hygienist	100%	100%	100%							

2c. Provide a measure(s) of the program's impact.



*Base Target - to reduce to 16 percent by FY 2022. *Stretch Target - to reduce to 11 percent by FY 2022. Since FY 2014, the Office of Dental Health has noticed an almost 4 percent drop in the instances of untreated tooth decay in the third grade children who are screened and that number continues to decline. Based on the average cost of restorations, this would represent a cost savings of over \$2 million to the Missouri Medicaid Program.

^{*}Dependent on access to schools under COVID-19 restrictions, the program's education, screening and varnish application may be interrupted.

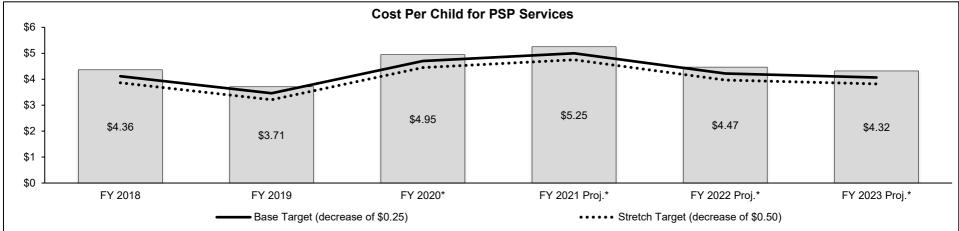
Department of Health and Senior Services

Office of Dental Health

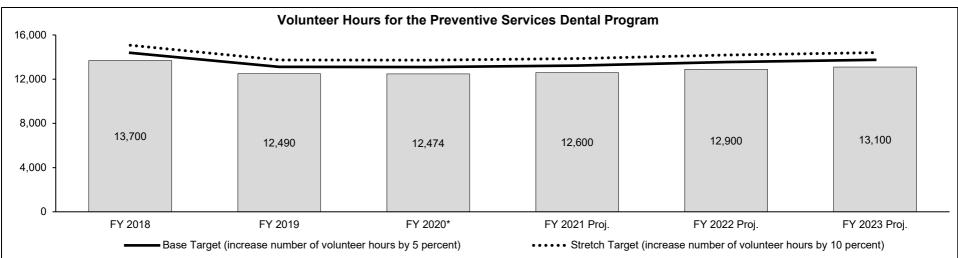
HB Section(s): 10.710, 10.730, 10.740

Program is found in the following core budget(s):

2d. Provide a measure(s) of the program's efficiency.



Note: Services include dental screening and fluoride treatment by a dental professional. *Due to COVID-19 restrictions and PPE expenses, the cost per child is expected to increase.



*Schools were closed in March of 2020 due to COVID-19, thus decreasing events and the need for volunteers.

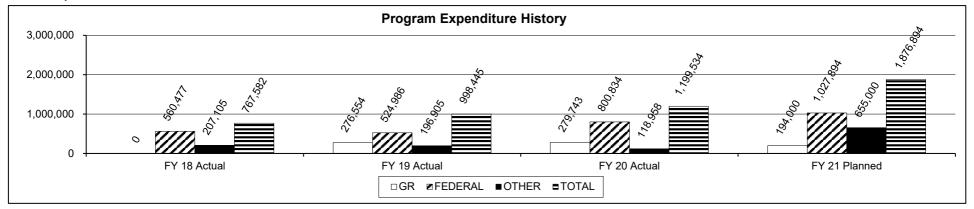
Department of Health and Senior Services HB Section(s): 10.710, 10.730, 10.740 Office of Dental Health Program is found in the following core budget(s):

2d. Provide a measure(s) of the program's efficiency. (continued)

	Preventive Services Program (PSP) - Estimated Value of Volunteer Time													
	FY 2	018	FY 2	019	FY 2020 Proj.		FY 2021 Proj.		FY 2022 Proj.		FY 2023 Proj.			
Volunteer	Volunteer	Market	Volunteer	Market	Volunteer	Market	Volunteer	Market	Volunteer	Market	Volunteer	Market		
Occupatio	Total	Value	Total	Value	Total	Value	Total	Value	Total	Value	Total	Value		
n	Hours		Hours		Hours		Hours		Hours		Hours			
Dentist	1,235	\$102,036	971	\$80,224	1,000	\$76,860	1,100	\$84,546	1,150	\$88,389	1,150	\$95,013		
Dental	3,342	\$112,592	3,446	\$116,096	3,500	\$118,090	3,600	\$121,464	3,700	\$124,838	3,700	\$124,653		
Hygienist														
Lay	8,243	\$190,166	8,057	\$185,875	8,100	\$186,867	8,200	\$189,174	8,250	\$190,328	8,250	\$190,328		
Volunteer														
AII	12,820	\$404,794	12,474	\$382,195	12,600	\$387,402	12,900	\$401,340	13,100	\$409,994	13,100	\$409,994		
Volunteers														

Note: 2019 Market value is calculated based on Missouri median hourly wages obtained from U.S. Bureau of Labor Statistics. (Dentist - \$76.86; Dental Hygienist - \$33.74; Lay Volunteer - \$23.07.) https://www.bls.gov/oes/current/oes mo.htm#00-0000

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



Department of Health and Senior Services	HB Section(s): 10.710, 10.730, 10.740
Office of Dental Health	·
Program is found in the following core budget(s):	

4. What are the sources of the "Other " funds?

Department of Health and Senior Services - Donated (0658).

- 5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

 Section 192.050, RSMo.
- 6. Are there federal matching requirements? If yes, please explain.

Yes, the Title V Maternal and Child Health Services Block grant requires three dollars of state funds for every four dollars of federal funds and the HRSA grant requires a 40% match from a non-federal source.

7. Is this a federally mandated program? If yes, please explain.

No.

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58240C
Office of Minority Health	_	
Core - Office of Minority Health	HB Section	10.750
	=	

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 2022 Governor's Recommenda				
	GR	Federal	Other	Total		GR	Fed	Other	Total	
PS	201,023	33,431	0	234,454	PS	0	0	0	0	
EE	105,230	0	0	105,230	EE	0	0	0	0	
PSD	89,110	0	0	89,110	PSD	0	0	0	0	
TRF	0	0	0	0	TRF	0	0	0	0	
Total	395,363	33,431	0	428,794	Total	0	0	0	0	
FTE	3.99	0.49	0.00	4.48	FTE	0.00	0.00	0.00	0.0	
Est. Fringe	122,630	17,956	0	140,586	Est. Fringe	0	0	0	0	

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

2. CORE DESCRIPTION

The Office of Minority Health develops public health interventions and provides technical assistance to decrease the rate of health disparities in minority communities; provides technical support for the design of culturally appropriate health messages and educational outreach; convenes minority-specific focus groups; develops and conducts surveys; and assists state and local partners with program implementation for "hard-to-reach" (underserved/vulnerable populations that are geographically, culturally, and economically isolated) minority populations. The office supports six regional minority health alliances that serve as a voice of advocacy and advice for improving the health status of minorities. The office co-sponsors workshops and symposiums to gather and distribute information to communities about emerging health issues, with an emphasis on chronic and infectious disease prevention, illegal drug and homicide prevention, and HIV/AIDS prevention.

B. PROGRAM LISTING (list programs included in this core funding)

Office of Minority Health

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58240C
Office of Minority Health	•	
Core - Office of Minority Health	HB Section	10.750
	•	

4. FINANCIAL HISTORY

	FY 2018	FY 2019	FY 2020	FY 2021
	Actual	Actual	Actual	Current Yr.
				_
Appropriation (All Funds)	416,882	418,448	425,305	428,794
Less Reverted (All Funds)	(11,588)	(11,625)	(11,770)	(11,568)
Less Restricted (All Funds)*	0	0	0	(9,787)
Budget Authority (All Funds)	405,294	406,823	413,535	407,439
Actual Expenditures (All Funds)	335,151	340,456	317,777	N/A
Unexpended (All Funds)	70,143	66,367	95,758	N/A
=				
Unexpended, by Fund:				
General Revenue	53,267	58,380	89,698	N/A
Federal	16,876	7,986	6,060	N/A
Other	0	. 0	. 0	N/A
	-	-	-	

Actual Expenditures (All Funds)

450,000

400,000

340,456

317,777

300,000

250,000

FY 2018

FY 2019

FY 2020

*Current Year restricted amount is as of 7/01/2020.

Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

CORE RECONCILIATION DETAIL

OFFICE OF MINORITY HEALTH & SENIOR SERVIN

5. CORE RECONCILIATION DETAIL

	428,794	0	154,65	296,363	84.48	IstoT	
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	105,230	0	0	105,230	00.0	33	
	734,454	0	164,66	201,023	84.4	Sd	
						ORE	GOVERNOR'S RECOMMENDED C
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							DEPARTMENT CORE REQUEST
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Internal reallocations based on planned expenditures.	(0)	0	0	0	00.0	Sd	Core Reallocation 268 7144
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	105,230	0	0	105,230	00.0	33	
	534,454	0	154,65	201,023	84.4	Sd	
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Explanation	Total	Other	Federal	ЯЭ	ЭТЭ	Budget Class	•

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DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

2ECNKED

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								OFFICE OF MINORITY HEALTH
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BUDGET

FY 2021

AUTDA

EX 2020

AUTDA

EX 2020

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Budget Object Summary

Decision Item

Budget Unit

SECURED

SECURED

DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

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00.0	0	42.0	626	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM SPEC	
00.0	0	00.0	017	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM ASSOC	
00.0	0	00.1	32,952	00.0	0	00.0	0	LEAD ADMIN SUPPORT ASSISTANT	
00.0	0	3.00	₱88'961	2.24	152,318	2.24	143,158	SPECIAL ASST PROFESSIONAL	
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00.0	0	00.0	0	00.0	017	00.0	0	HEALTH PROGRAM REP II	
00.0	0	0.00	0	١.00	876,82	97.0	766,42	ADMIN OFFICE SUPPORT ASSISTANT	
								СОВЕ	
								OFFICE OF MINORITY HEALTH	
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	317	DOLLAR	3T7	DOLLAR	Budget Object Class	
							-		

BUDGET

FY 2021

ACTUAL

LA 5050

AUTDA

LA 5050

Decision Item

Budget Unit

Department of Hea	alth and Senior Services		HB Section(s): 10.750			
Office of Minority	Health		-			
Program is found	in the following core budget(s	s):	_			
	Office of Minority					
	Health				TOTAL	
GR	395,363				395,363	
FEDERAL	33,431				33,431	
OTHER	0				0	
TOTAL	428,794				428,794	

1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need and Enhance access to care.

1b. What does this program do?

The Office of Minority Health (OMH) exists to decrease health disparities in minority and "hard to reach" (underserved/vulnerable) communities. Some of the activities of the Office are:

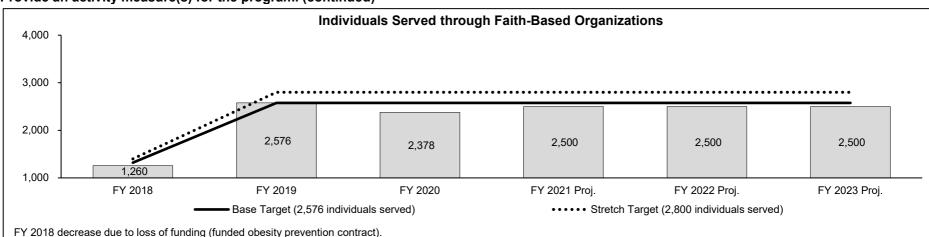
- conducting public health interventions, providing technical support, and designing culturally appropriate health messages;
- · providing educational outreach to faith-based organizations, geographically, culturally, and economically isolated minority populations; and
- focusing on infant mortality and viral disease (HIV/AIDS) reduction, obesity, chronic disease, violence, and drug addiction prevention.

2a. Provide an activity measure(s) for the program.

Health Screenings Conducted by Agencies at Events Co-Sponsored by the DHSS Office of Minority Health in FY 2020					
Blood Pressure Checks	263	Weight	0	HIV/STD	37
BMI Evaluations	53	Nutrition/Healthy Eating	0	Depression	0
Cholesterol	56	Dental Hygiene	32	Hepatitis C	0
Diabetes	13	Mammogram	3	Heart Assessment	0
Eye Exam	0	Flu Shots	8	Prostate	30
Glaucoma	47	Chiropractic	33		
Note: Decrease due to COVID.		-		GRAND TOTAL	575

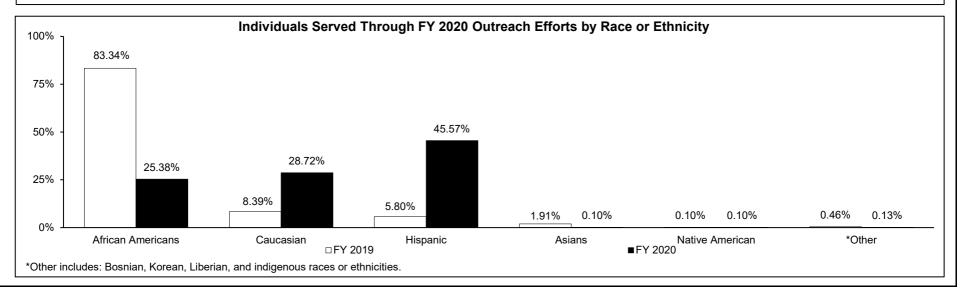
Department of Health and Senior Services HB Section(s): 10.750 Office of Minority Health Program is found in the following core budget(s):

2a. Provide an activity measure(s) for the program. (continued)



FY 2019 increase due to increase in number of events.

FY 2020 decrease due to COVID-19.

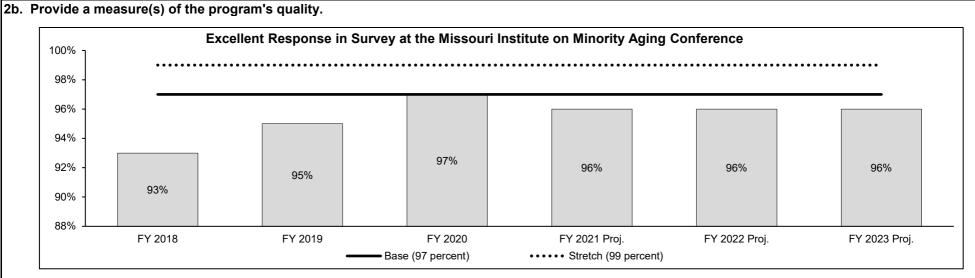


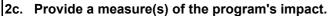
Department of Health and Senior Services

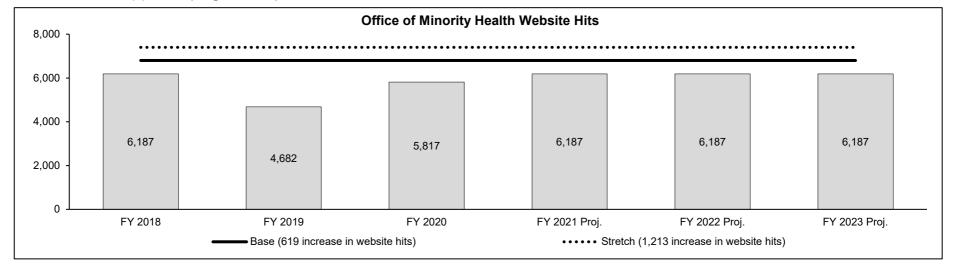
Office of Minority Health

HB Section(s): 10.750

Program is found in the following core budget(s):







Department of Health and Senior Services

Office of Minority Health

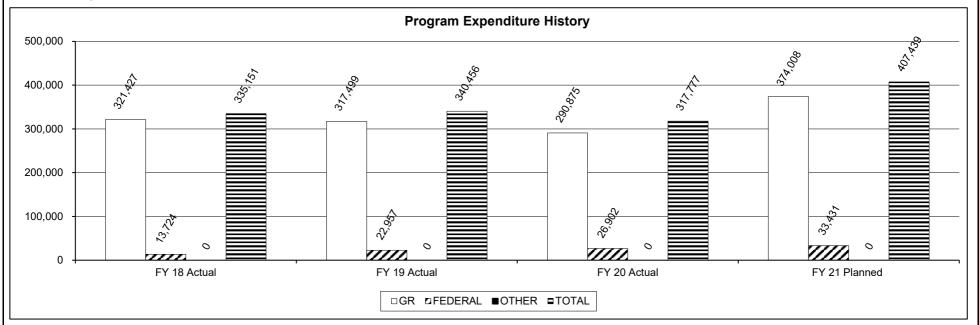
Program is found in the following core budget(s):

2d. Provide a measure(s) of the program's efficiency.

	Individuals Served Through Regional Minority Health Alliances									
	FY 2018* FY 2019 FY 2020** FY 2021 Proj. FY 2022 Proj. FY 2023 Pro									
Central	1,952	1,164	316	1,200	1,200	1,200				
Eastern	30,772	11,528	61,193	11,750	11,750	11,750				
Northeast	2,207	132	21	150	150	150				
Southeast	934	1,113	0	1,100	1,100	1,100				
Southwest	1,500	3,500	2,000	3,500	3,500	3,500				
Western	3,579	13,451	5,192	13,500	13,500	13,500				

^{*}FY 2018 Decrease in overall events held, partially due to staff vacancy. OMH will increase outreach efforts through social media and website.

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



^{**}FY 2020 Decrease in events held due to COVID-19.

D	epartment of Health and Senior Services	HB Section(s):	10.750
0	fice of Minority Health		
Ρı	ogram is found in the following core budget(s):		
4.	What are the sources of the "Other " funds?		
	Not applicable.		
5.	What is the authorization for this program, i.e., federal or state statute, etc.? (In	clude the federal program number, if applicable.)	
	Section 192.083, RSMo.		
6.	Are there federal matching requirements? If yes, please explain.		
	No.		
7.	Is this a federally mandated program? If yes, please explain.		
	No.		

CORE DECISION ITEM

Budget Unit 58020C, 58024C Health and Senior Services **Community and Public Health**

Core - Public Health/ Healthcare Emergency Preparedness and Response Coordination **HB Section** 10.755, 10.760

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 202	2 Governor's	Recommendat	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	1,833,268	0	1,833,268	PS -	0	0	0	0
EE	0	16,612,072	300,000	16,912,072	EE	0	0	0	0
PSD	500,000	18,611,928	500,000	19,611,928	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	500,000	37,057,268	800,000	38,357,268	Total	0	0	0	0
FTE	0.00	33.02	0.00	33.02	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	1,071,043	0	1,071,043	Est. Fringe	0	0	0	0
Note: Fringes bu	udgeted in House	Bill 5 except for	certain fringes	budgeted	Note: Fringes b	oudgeted in Hous	se Bill 5 except	for certain fring	es budgeted

directly to MoDOT, Highway Patrol, and Conservation.

directly to MoDOT, Highway Patrol, and Conservation.

Federal Funds: Department of Health and Senior Services Federal (0143) and Department of Health and Senior Services Federal Stimulus (2350). Other Funds: Missouri Public Health Services (0298), Insurance Dedicated (0566).

2. CORE DESCRIPTION

The Division of Community and Public Health requests core funding to support its responsibilities in public health and healthcare planning and response to emergencies through the Public Health Emergency Preparedness/Cities Readiness Initiative and the Hospital Preparedness Program Grants. Examples of these emergencies include: floods, tornadoes, earthquakes, influenza pandemics, disease outbreaks, environmental hazardous spills, biological and chemical terrorism, and nuclear power plant accidents. Through partnerships with local public health agencies, hospitals, other health organizations, local government, law enforcement agencies, schools, and other partners, systems are put in place to protect the health of Missourians during a public health emergency. The department performs disease and disaster surveillance and notification activities and provides health care guidance and coordination of response to these events. To be prepared for a public health emergency, training and exercises are hosted throughout the state. These exercises are designed, organized, conducted, and evaluated to help first responders practice, build relationships, and identify problems before a real situation occurs. The department also oversees initiatives that fund training, exercises, emergency supplies, and resources that enable regional emergency preparedness healthcare coalitions (consisting of hospitals, emergency medical services, public health, and other healthcare/medical providers) throughout the state to be better prepared to handle emergencies requiring a medical or healthcare response. Through a contract with the State Emergency Management Agency (SEMA), assistance in planning for public health emergencies for the general public is provided through educational emergency preparedness materials, known as Ready-in-3. Assistance and support for response is also provided to the local communities by maintaining the medical reserve corps and healthcare volunteer registry, Show-Me Response. Other assistance includes Strategic National Stockpile which offers an emergency supply of medications, antidotes, and medical supplies to be disbursed in a timely manner for certain events. Appropriation for these contracted services appears in SEMA's budget.

CORE DECISION ITEM

Health and Senior Services

Budget Unit 58020C, 58024C

Community and Public Health

HB Section 10.755, 10.760

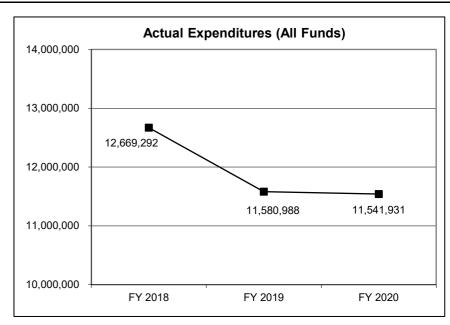
Core - Public Health/ Healthcare Emergency Preparedness and Response Coordination

3. PROGRAM LISTING (list programs included in this core funding)

Public Health/Healthcare Emergency Preparedness and Response Coordination

4. FINANCIAL HISTORY

_	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	17,665,597	16,697,987	49,738,418	39,651,066
Less Reverted (All Funds)	0	0	0	0
Less Restricted (All Funds)*	0	0	0	(500,000)
Budget Authority (All Funds)	17,665,597	16,697,987	49,738,418	39,151,066
Actual Expenditures (All Funds)	12,669,292	11,580,988	11,541,931	N/A
Unexpended (All Funds)	4,996,305	5,116,999	38,196,487	N/A
Unexpended, by Fund: General Revenue Federal Other	0 4,996,305 0	0 5,116,999 0	0 38,196,487 0	N/A N/A N/A



*Current Year restricted amount is as of 7/01/2020.

Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

OFFICE OF EMERGENCY COORD

	1,833,268	0	1,833,268	0	33.02	ЭИО: Ва	OWWENDED C	солевиов.г вес	
	38,057,265	200,000	37,057,265	200,000	33.02	IstoT			
	826,116,61	200,000	826,116,81	200,000	00.0	DD			
	16,612,069	0	16,612,069	0	00.0	33			
	1,833,268	0	1,833,268	0	33.02	Sd			
							TSBUDEST	DEPARTMENT COR	
	(108,892,1)	0	(108,862,1)	0	(00.0)	SESNAH	Э ТИЭМТЯАЧ	AET DE	
ılanned expenditures.	b								
no based snoitsools based on	I 961'⊅10'l	0	961,410,1	0	00.0	ВD	1493 692	Core Reallocation	
ılanned expenditures.									
nernal reallocations based on		0	(361,410,1)	0	00.0	33	1495 692	Core Reallocation	
lanned expenditures.					(22.2)				
nternal reallocations based on	_	0	0	0	(00.0)	Sd	269 5903	Core Reallocation	
One-time expenditure for FY 2021 IDI - Poison Control Hotline.	•	0	(000,001)	0	00.0	DA	283 6873	1x Expenditures	
IDI - Coronavirus Response.		U	(000 001)	U	00 0	da	6209 666	oontibaoax∃ xt	
One-time expenditure for FY 2021		0	(108,891,1)	0	00.0	33	0749 677	1x Expenditures	
	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•				DEPARTMENT COR	
	39,351,066	200'009	38,351,066	200,000	33.02	IstoT			
	££7,766,81	200,000	££7,768,71	200,000	00.0	ЬD			
	18,820,065	0	18,820,065	0	00.0	33			
	1,833,268	0	1,833,268	0	33.02	Sd			
							SE	OTAV ABTAA 94AT	
noitanation	3 lstoT	Other	Federal	ЯЭ	3T7	Budget Class			

0 16,612,069

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OFFICE OF EMERGENCY COORD

	38,057,265	200,000	37,057,265	200,000	33.02	Total	
	826,116,61	200,000	826,116,81	000'009	00.0		
						ORE	GOVERNOR'S RECOMMENDED C
noitanalqx	Total	Other	Federal	В	3T7	Class	-
						Budget	
						7	5. CORE RECONCILIATION DETAI

DHSS OUTBREAK RESPONSE

					_				
	33	00.0			0	300,000	300,006	•	
GOVERNOR'S RECOMMENDED	CORE								
	IstoT	00.0		(0	300,000	300,000	•	
	33	00.0		(0	300,000	300,000	•	
DEPARTMENT CORE REQUEST									
	IstoT	00.0		(0	300,000	300,000	•	
	33	00.0			0	300,000	300,000	•	
TAFP AFTER VETOES									
	Budget Sass	3T4	ЯЭ	Federal		Other	IstoT	Explanation	
5. CORE RECONCILIATION DETA	ור								

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Total

300,000

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DECISION ITEM SUMMARY

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DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

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СОГЛШИ	СОГЛШИ	3T7	DOLLAR	ЭТЯ	DOLLAR	3T7	DOLLAR	Fund
								DEFICE OF EMERGENCY COORD
								COKE
00.0	0	33.02	1,833,268	33.02	1,833,268	13.61	1,258,614	PERSONAL SERVICES PHSS-FEDERAL AND OTHER FUNDS
00.0	0	33.02	892,888,1	33.02	893,268,1	13.61	1,258,614	29 - JATOT
00.0	0	00.0	1,335,044	00.0	2,349,239	00.0	1,024,321	EXPENSE & EQUIPMENT DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	15,555,1	00.0	928,074,81	00.0	681,854	DHSS FEDERAL STIMULUS
00.0	0	00.0	690,219,81	00.0	18,820,065	00.0	1,462,510	33 - JATOT
00.0	0	00.0	200'009	00.0	200,000	00.0	200'000	PROGRAM-SPECIFIC GENERAL REVENUE
00.0	0	00.0	192,391,01	00.0	990,181,6	00.0	Z68,E38,T	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	799,914,8	00.0	799,818,8	00.0	0	DHSS FEDERAL STIMULUS
00.0	0	00.0	200,000	00.0	200,000	00.0	200,000	INSURANCE DEDICATED FUND
00.0	0	00.0	826,119,61	00.0	EET, 769, 81	00.0	268,863,892	DATOT
00.0	0	33.02	38,057,265	33.02	990,135,65	13.61	910,585,11	JATOT
								COVID-19 Grant Authority NDI - 1580003
00.0	0	00.0	960'999	00.0	0	00.0	0	PERSONAL SERVICES DHSS FEDERAL STIMULUS
00.0	0	00.0	960'999	00.0	_ 0	00.0	0	S9 - JATOT
			0001000		•			EXPENSE & EQUIPMENT
00.0	0	00.0	169'619'1	00.0	0	00.0	0	DHSS FEDERAL STIMULUS
00.0	0	00.0	169'619'1	00.0	0	00.0	0	33 - JATOT
00 0	O	00 0	VOC 292 V	00 0	U	00 0	U	PROGRAM-SPECIFIC
00.0	0	00.0		00.0	$-\frac{0}{0}$	00.0	$-\frac{0}{0}$	DHSS FEDERAL STIMULUS
	-		402,787,1				- -	G9 - JATOT
00.0	0	00.0	3,951,990	00.0	0	00.0	0	JATOT
								ELC Enhanced Detection NDI - 1580004
00.0	U	13 00	NAT CNA	00 0	U	00 0	U	PERSONAL SERVICES DHSS FEDERAL STIMULUS
	0	13.00	79Z,Z4Z	00.0		00.0	$-\frac{0}{0}$	007000000000000000000000000000000000000

BUDGET

FY 2021

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FY 2020

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Budget Object Summary

Decision Item

Budget Unit

DECISION ILEM SUMMARY

OFFICE OF EMERGENCY COORD								
pun	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	3T7	СОГЛШИ	СОГЛШИ
Budget Object Summary	JAUTOA	AUTOA	BUDGET	BUDGET	рерт кед	DEPT REQ	SECURED	SECURED
Decision Item	FY 2020	FY 2020	FY 2021	FY 2021	FY 2022	FY 2022	*****	*****
Budget Unit								

JATOT GNAS	910,585,11\$	19.52	990'192'62\$	33.02	898'9 7 9'9∠≀\$	46.02	0\$	00.0
JATOT	0	00.0	0	00.0	£18,7£8,₽£1	13.00	0	00.0
Q9 - JATOT	0	00.0	0	00.0	390,847,601	00.0	0	00.0
PROGRAM-SPECIFIC DHSS FEDERAL STIMULUS	0	00.0	0	00.0	390,847,601	00.0	0	00.0
33 - JATOT	0	00.0	0	00.0	787,346,784	00.0	0	00.0
EXPENSE & EQUIPMENT DHSS FEDERAL STIMULUS	0	00.0	0	00.0	24,346,784	00.0	00.0	00.0
ELC Enhanced Detection NDI - 1580004								
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DECISION ITEM SUMMARY

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00.0	0	00.0	300,000	00.0	300,000	00.0	0	33 - JATOT
00.0	0	00.0	300,000	00.0	300,000	00.0	0	EXPENSE & EQUIPMENT MO PUBLIC HEALTH SERVICES
								СОКЕ
								DHSS OUTBREAK RESPONSE
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	ЭТЭ	DOLLAR	ЭТЭ	DOLLAR	Fund
SECURED	SECNKED	рерт кед	рерт кед	BUDGET	BUDGET	AUTOA	JAUT DA	Budget Object Summary
******	******	FY 2022	FY 2022	トソ 2021	FY 2021	FY 2020	FY 2020	Decision Item
								Budget Unit

\$300,000

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EX 2022

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								·
00.0	0	08.0	∠ 89'6 ⊅	00.1	816,46	1.53	105,702	SPECIAL ASST PROFESSIONAL
00.0	0	00.0	0	00.0	0	90.0	972,8	MISCELLANEOUS PROFESSIONAL
00.0	0	3.52	104,930	0.00	0	91.1	974,63	PROJECT SPECIALIST
00.0	0	00.0	0	00.0	0	24.0	17,320	ADMINISTRATIVE ASSISTANT
00.0	0	00.0	0	0.00	0	12.0	699'9l	DESIGNATED PRINCIPAL ASST DEPT
00.0	0	00.0	0	1.53	94,229	98.0	167,83	HEALTH & SEUIOR SVCS MANAGER 1
00.0	0	00.0	0	00.0	0	20.0	1'236	REGISTERED NURSE MANAGER B1
00.0	0	00.0	0	91.8	770,102	70.2	124,961	Laboratory mgr B1
00.0	0	00.0	0	78.0	848,68	60.0	213,6	FISCAL & ADMINISTRATIVE MGR B1
00.0	0	00.0	0	96.1	116,432	24.1	140,28	ENVIRONMENTAL SCIENTIST
00.0	0	00.0	0	0.00	0	00.0	04	ENVIRONMENTAL SPEC III
00.0	0	00.0	0	2.60	181,881	85.0	24,262	РКОСКАМ СООКО DMH DOHSS
00.0	0	00.0	0	1.30	677, <i>4</i> 71	94.0	† 98' † 9	MEDICAL CUSLT
00.0	0	00.0	0	00.0	0	20.0	949	VAS TAOPAUS YAOTAAOBAJ
00.0	0	00.0	0	09.0	660'9l	1 2.0	16,023	LABORATORY SUPPORT TECH II
00.0	0	00.0	0	0.00	0	00.0	78	MEDICAL TECHNOLOGIST II
00.0	0	00.0	0	06.1	8£1,48	۱.40	263,532	SENIOR PUBLIC HLTH LAB SCINTST
00.0	0	00.0	0	69.0	880,81	0.50	20,598	PUBLIC HEALTH LAB SCIENTIST
00.0	0	00.0	0	91.0	6,250	65.0	192,11	ASSOC PUBLIC HLTH LAB SCIENTST
00.0	0	00.0	0	9.00	878,432	7.54	138,457	SENIOR EPIDEMIOLOGY SPECIALIST
00.0	0	00.0	0	87.8	170,923	ST.1	7 76,87	EPIDEMIOLOGY SPECIALIST
00.0	0	00.0	0	23.0	26,360	0.30	869'⊅↓	OCCUPTUL SFTY & HLTH CNSLT II
00.0	0	00.0	0	1.30	606,28	01.1	069'99	НЕАГТН РКОСРАМ СООКDINATOR
00.0	0	00.0	0	2.86	697'tEl	11.2	£91,46	HEALTH PROGRAM REP III
00.0	0	00.0	0	2.00	₹66,87	£E.1	621,29	HEALTH PROGRAM REP II
00.0	0	00.0	0	00.0	0	98.0	29,246	HEALTH PROGRAM REP I
00.0	0	00.0	0	9۲.۱	166,68	96.1	۲0۴٬40۱	PLANNER III
00.0	0	00.0	0	68.0	6 ⊅ 0'∠≀	02.0	497'6	RESEARCH ANAL III
00.0	0	00.0	0	61.0	671'9	60.03	890'l	KESEARCH ANAL II
00.0	0	00.0	0	00.0	0	60.03	986	KESEARCH ANAL I
00.0	0	00.0	0	00.0	0	00.0	742	STOREKEEPER II
00.0	0	00.0	0	00.0	0	00.0	01	SR OFFICE SUPPORT ASSISTANT
								СОКЕ
								OFFICE OF EMERGENCY COORD
СОГЛШИ	СОГЛШИ	ЭТЯ	DOLLAR	ЭТЯ	DOLLAR	ЭТЯ	DOLLAR	Budget Object Class

BUDGET

FY 2021

BUDGET

FY 2021

ACTUAL

LA 5050

ACTUAL

EX 2020

Decision Item

Budget Unit

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СОГЛШИ

SECURED

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DEPT REQ

EX 2022

DOLLAR

DEPT REQ

EX 2022

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BUDGET

FY 2021

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СОМРИТЕК ЕQUIРМЕИТ	861,2	00.0	218,99	00.0	76,352	00.0	0	00.0
W&R SERVICES	289,172	00.0	389,523	00.0	325,443	00.0	0	00.0
PROFESSIONAL SERVICES	182,854	00.0	1,207,734	00.0	1'0⊄8'829	00.0	0	00.0
COMMUNICATION SERV & SUPP	ታ ለታ,42ሰ	00.0	48,229	00.0	792,252	00.0	0	00.0
PROFESSIONAL DEVELOPMENT	007,81	00.0	122,970	00.0	24,259	00.0	0	00.0
SUPPLIES	799,ET <i>4</i>	00.0	15,320,080	00.0	13,826,733	00.0	0	00.0
FUEL & UTILITIES	0	00.0	982,8	00.0	982,8	00.0	0	00.0
TRAVEL, OUT-OF-STATE	617,6	00.0	₽ 5 ,841	00.0	709,21	00.0	0	00.0
TRAVEL, IN-STATE	20,040	00.0	۲۵۵,۶۱۱	00.0	52,999	00.0	0	00.0
S9 - JATOT	1,258,614	13.61	1,833,268	33.02	1,833,268	33.02	0	00.0
SR HEALTH AND SAFETY ANALYST	0	00.0	0	00.0	24,080	<u> </u>	0	00.0
SR EMERGENCY MANAGEMENT OFCR	0	0.00	0	0.00	0	00.0	0	00.0
PUBLIC HEALTH PROGRAM MANAGER	0	00.0	0	0.00	709'96	1.22	0	00.0
PUBLIC HEALTH PROGRAM SPV	0	00.0	0	00.0	۶۲ ۱/۱ ۲۲	2.93	0	00.0
SR PUBLIC HEALTH PROGRAM SPEC	0	00.0	0	0.00	366,07	11.1	0	00.0
PUBLIC HEALTH PROGRAM SPEC	0	00.0	0	00.0	112,951	2.32	0	00.0
PUBLIC HEALTH PROGRAM ASSOC	0	00.0	0	00.0	101,309	75.2	0	00.0
LABORATORY MANAGER	0	00.0	0	00.0	1 28,824	16.0	0	00.0
LABORATORY SUPERVISOR	0	00.0	0	00.0	609'84	۶۶.۱	0	00.0
SENIOR LABORATORY SCIENTIST	0	00.0	0	00.0	916,27	1.52	0	00.0
LABORATORY SCIENTIST	0	00.0	0	00.0	978,62	09.0	0	00.0
LNATSISSA TAO99US YAOTAAO8AJ	0	00.0	0	00.0	164,31	13.0	0	00.0
EPIDEMIOLOGIST	0	00.0	0	0.00	242,299	か じか	0	00.0
ASSOCIATE EPIDEMIOLOGIST	0	00.0	0	00.0	166,631	2.49	0	00.0
ACCOUNTANT SUPERVISOR	0	00.0	0	00.0	4,642	70.0	0	00.0
ENVIRONMENTAL PROGRAM SPV	0	00.0	0	00.0	£71,6	61.0	0	00.0
ENVIRONMENTAL PROGRAM SPEC	0	00.0	0	00.0	102,055	89.1	0	00.0
CHIEE PHYSICIAN	0	0.00	0	0.00	£19,731	11.1	0	00.0
RESEARCH/DATA ANALYST	0	00.0	0	0.00	724,91	65.0	0	00.0
ASSOC RESEARCH/DATA ANALYST	0	00.0	0	0.00	₹00°₽	11.0	0	0.00
SENIOR PROGRAM SPECIALIST	0	00.0	0	00.0	740,271	2.98	0	00.0
TNATSISSA MAAOOA9	0	00.0	0	0.00	4,392	11.0	0	00.0
СОКЕ								
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BUDGET

FY 2021

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ACTUAL

LA 5050

Budget Object Class

Decision Item

Budget Unit

Page 43 of 81 Page 43 of 81 Page 43 of 81

00.0		00.0	000'009\$	00.0	000'009\$	00.0	000'009\$	GENERAL REVENUE
00.0	0\$	33.02	392,730,8£\$	33.02	990,135,65\$	19.62	910,385,11\$	ТАТОТ ПИАЯЭ
00.0	0	00.0	826,119,61	00.0	££7,768,81	00.0	Z68 ,863,88	DG - JATOT
00.0	0	00.0	826,116,61	00.0	££7,798,81	00.0	268,898,8	PROGRAM DISTRIBUTIONS
0.00	0	00.0	16,612,069	00.0	18,820,065	00.0	012,534,1	33 - JATOT
00.0	0	00.0	2,503	00.0	668,01	00.0	6Z6'l	WISCELLANEOUS EXPENSES
0.00	0	00.0	0	00.0	5,759	00.0	0	EQUIPMENT RENTALS & LEASES
00.0	0	00.0	0	00.0	098,8	00.0	0	BUILDING LEASE PAYMENTS
0.00	0	00.0	418,012,1	00.0	911,794,1	00.0	742,73£	ОТНЕК ЕДПРМЕИТ
								COKE
								OFFICE OF EMERGENCY COORD
СОГЛШИ	СОГЛШИ	ЭТЯ	DOLLAR	ЭТЯ	DOLLAR	3T7	DOLLAR	Budget Object Class
SECNKED	SECURED	рерт кед	рерт кед	BUDGET	BUDGET	AUTOA	AUTDA	Decision Item
*****	******	FY 2022	FY 2022	FY 2021	FY 2021	E A 5050	FY 2020	Budget Unit

000'009\$

990'196'86\$

00.0

19.62

000'009\$

910,585,018

OTHER FUNDS

FEDERAL FUNDS

000'009\$

437,067,265

00.0

33.02

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33.02

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\$300,000

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00.0 00.0		00.0 00.0	0\$ 0\$	00.0 00.0	0\$ 0\$	00.0 00.0	0\$ 0\$	GENERAL REVENUE FEDERAL FUNDS
00.0	0\$	00.0	000'00ɛ\$	00.0	000'00£\$	00.0	0\$	латот пия яе
00.0	0	00.0	300,000	00.0	300,000	00.0	0	33 - JATOT
00.0	0	00.0	300,000	00.0	300,000	00.0	0	PROFESSIONAL SERVICES
								СОВЕ
								DHSS OUTBREAK RESPONSE
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T4	DOLLAR	ЭТЭ	DOLLAR	Budget Object Class
SECURED	SECURED	DEPT REQ	рерт кед	BUDGET	BUDGET	AUTOA	AUTOA	Decision Item
*******	******	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit

\$300,000

00.0

0\$

OTHER FUNDS

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00.0

Health and Senior Services
HB Section(s): 10.700, 10.710, 10.755

Public Health/Healthcare Emergency Preparedness and Response Coordination

Program is found in the following core budget(s):

	DCPH Program Operations	DCPH Programs and Contracts	Office of Emergency Coordination		TOTAL
CD	15,821	Contracts	500,000		515,821
GR		0 000	,		,
FEDERAL	4,270	8,903	30,865,836		30,879,009
OTHER	0	0	500,000		500,000
TOTAL	20,091	8,903	31,865,836		31,894,830

1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need.

1b. What does this program do?

This program manages public health emergency planning and response activities in order to protect the health and safety of citizens when emergencies arise. Activities include:

Mitigation

- Ensure an all-hazard response plan is current and operational for public health incidents. ··
- Ensure the regional healthcare coalitions and local public health agencies are actively engaged in jurisdictional risk assessments, emergency planning efforts, and Training and Exercise Planning Workshops.
- Ensure an After Action Report is completed at the end of every incident to identify strengths and areas for improvement.
- Maintain 24/7 contact information for all public health response teams and partners.
- Conduct regular communication drills to assure systems are operable at all times.

Preparedness

- Provide technical assistance and administrative support to the regional healthcare coalitions, Medical Reserve Corps units, and local public health agencies to assure readiness to respond to emergencies.
- Maintain the mandated Emergency System for Advance Registration of Volunteer Health Professionals.
- Maintain deployment readiness of the state's mobile medical unit, MOMORT, and MO-1 Disaster Medical Assistance (MO-1 DMAT) teams and resources. To adequately respond to the COVID-19 outbreak, DMAT added over 200 additional DMAT members via a state-wide recruitment process.
- Pre-identify public health response teams who can respond at a moment's notice. In order to respond effectively to COVID-19 outbreak, teams of contact tracers were added to the available public health response teams.
- Provide all-hazard response training to public health responders.

Health and Senior Services

HB Section(s): 10.700, 10.710, 10.755

Public Health/Healthcare Emergency Preparedness and Response Coordination

Program is found in the following core budget(s):

1b. What does this program do? (continued)

Response

- Assist public health and medical partners, including regional healthcare coalitions, with resource coordination and requests in response to an emergency incident.
- Maintain redundant communication modes to avoid isolation of disaster affected areas.
- Utilize the Missouri Health Notification System to distribute situational awareness information to local, state, and federal partners. Pertinent and timely medical information was distributed related to COVID-19 to medical practitioners.
- Increase monitoring of health care facilities' and long-term care facilities' operational status. An alternate care facility was operational during COVID-19 response in greater St. Louis region. The box-it in strategy was used to assist long-term care facilities to contain COVID-19 outbreaks within their facilities.

Recovery

- Coordinate with local, state, and federal partners for return to pre-emergency incident levels or better for all ESF-8 (National Incident Command Center Designation) partners and services.
- Restore or replace all deployed, state-level ESF-8 resources.

2a. Provide an activity measure(s) for the program.

Missouri Health Network System (MO-HNS) Communications									
	FY 2018	FY 2019	FY 2020	FY 2021 Proj.	FY 2022 Proj.	FY 2023 Proj.			
Alerts/Advisory/Guidance Issued	18	27	32	30	30	30			
Registered Users	5,214	5,703	5,914	5,900	5,900	5,900			

Families Reached Through Disaster Preparedness								
FY 2018	FY 2019	FY 2020	FY 2021 Proj.	FY 2022 Proj.	FY 2023 Proj.			
446,445	447,200	221,836	450,000	450,000	450,000			
Notification Drills Conducted								
FY 2018	FY 2019	FY 2020	FY 2021 Proj.	FY 2022 Proj.	FY 2023 Proj.			
00	4.4	00	4 =	45	15			

Drills are conducted for Strategic National Stockpile team, Radiological Response team, Local Public Health Agency Administrators, BioWatch Advisory Committee, and State Emergency Operations Center Emergency Response Center Teams.

	Public Health Emergency Hotline Calls Received/Handled									
FY 2018	FY 2019	FY 2020	FY 2021 Proj.	FY 2022 Proj.	FY 2023 Proj.					
2,182	2,182 1,776		3,461 1,500		1,500					
	DHSS	e Hits								
FY 2018	FY 2019	FY 2020	FY 2021 Proj.	FY 2022 Proj.	FY 2023 Proj.					
44,894	33,074	76,252	42,000	42,000	42,000					

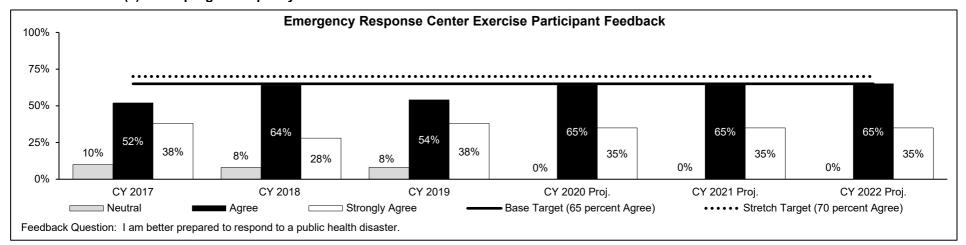
Health and Senior Services

HB Section(s): 10.700, 10.710, 10.755

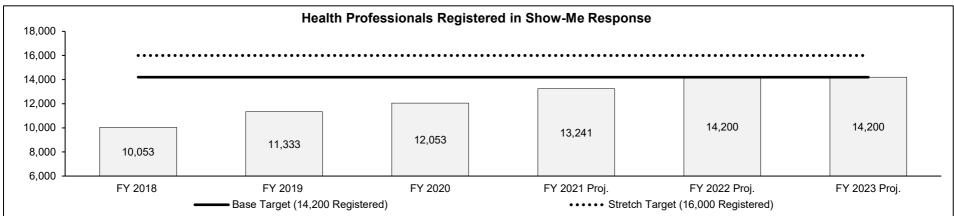
Public Health/Healthcare Emergency Preparedness and Response Coordination

Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality.



2c. Provide a measure(s) of the program's impact.



Show-Me Response is Missouri's Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP). This registry is a robust and well-functioning database representing RNs, physicians, and other professionals who may be contacted immediately to serve in the event of an emergency. Maintenance of the registry includes annual confirmation of a current Missouri license and willingness to serve. A registry of this type is a capability requirement of the Public Health Emergency Preparedness Grant, required through the Pandemic and Hazards All Preparedness Act.

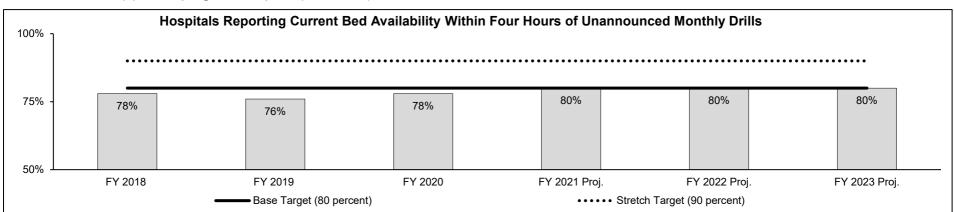
Health and Senior Services

HB Section(s): 10.700, 10.710, 10.755

Public Health/Healthcare Emergency Preparedness and Response Coordination

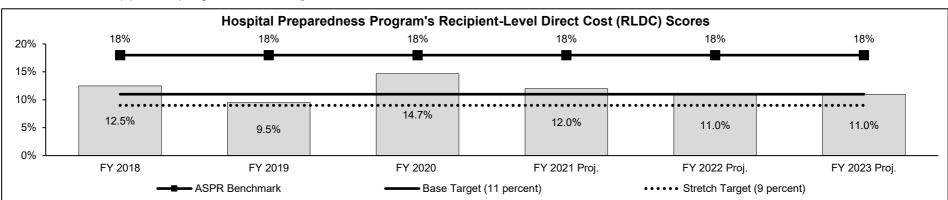
Program is found in the following core budget(s):

2c. Provide a measure(s) of the program's impact. (continued)



Regular unannounced drills allow the program to ensure the ability to query bed availability during an actual emergency incident to allow patient movement and patient distribution during a medical emergency incident. It is also a federal grant requirement the program be able to query and report bed availability at any time if requested by the Assistant Secretary for Preparedness and Response (ASPR) of the U.S. Department of Health and Human Services and at the time of a medical emergency incident.

2d. Provide a measure(s) of the program's efficiency.



The Assistant Secretary for Preparedness and Response (ASPR) of the U.S. Department of Health and Human Services (DHHS) funds the Hospital Preparedness Program. ASPR initiated a performance measure of Recipient-Level Direct Cost (RLDC) as a benchmark in FY 2018. ASPR requires recipients to be 18 percent or less RLDC which includes personnel, fringe benefits, and travel costs. Keeping these costs low allows the program to contract more funding to regional healthcare coalitions, which is a federal goal, for emergency preparedness activities.

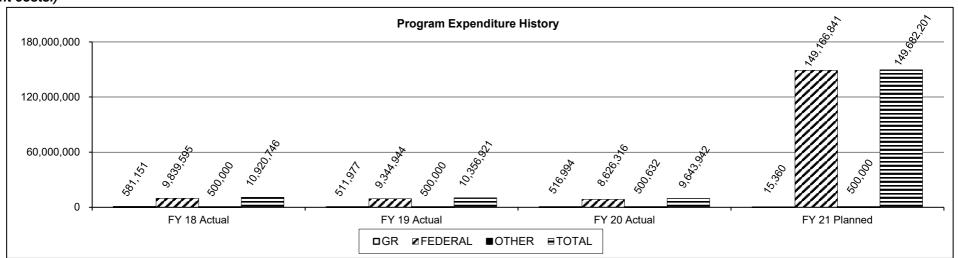
Health and Senior Services

HB Section(s): 10.700, 10.710, 10.755

Public Health/Healthcare Emergency Preparedness and Response Coordination

Program is found in the following core budget(s):

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other" funds?

Federal funds consist of Department of Health and Senior Services Federal (0143) and Department of Health and Senior Services Federal Stimulus (2350). Other funds consist of Insurance Dedicated (0566).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

319C-1 and 319C-2 of the Public Health Service (PHS) Act.

6. Are there federal matching requirements? If yes, please explain.

Yes, the required match is ten percent of federal funds awarded.

7. Is this a federally mandated program? If yes, please explain.

No.

14

RANK:

Department of H	ealth and Seni	or Services	_		Budget Unit 58	8020C		_	_	
Division of Com	munity and Pul	blic Health			_					
COVID-19 Grant	Authority NDI			DI# 1580003	HB Section 10.755					
1. AMOUNT OF	REQUEST									
		FY 2022 Budg	et Request			FY 202	2 Governor's	Recommend	ation	
	GR	Federal	Other	Total		GR	Federal	Other	Total	
PS	0	565,094	0	565,094	PS	0	0	0	0	
EE	0	1,619,691	0	1,619,691	EE	0	0	0	0	
PSD	0	1,767,204	0	1,767,204	PSD	0	0	0	0	
TRF	0	0	0	0	TRF	0	0	0	0	
Total	0	3,951,989	0	3,951,989	Total	0	0	0	0	
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00	
Est. Fringe	0	187,159	0	187,159	Est. Fringe	0	0	0	0	
Note: Fringes but	dgeted in Hous	e Bill 5 except	for certain frii	nges	Note: Fringes	budgeted in	House Bill 5 e	xcept for certa	in fringes	
budgeted directly	to MoDOT, Hig	hway Patrol, a	nd Conserva	tion.	budgeted direct	tly to MoDO	T, Highway Pa	trol, and Cons	ervation.	

2. THIS REQUEST CAN BE CATEGORIZED AS:

New Legislation		New Prog	ram	Fund Switch
Federal Mandate		Program	Expansion	Cost to Continue
GR Pick-Up		Space Re	quest	Equipment Replacement
Pay Plan	X	Other:	Federal Grant Authority	

3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

The Department of Health and Senior Services has received a variety of grants from the Centers for Disease Control and Prevention (CDC) to respond to the COVID-19 pandemic. Appropriations for PS authority and corresponding FTE are required to utilize the grants:

- <u>CDC COVID19 Crisis Response:</u> for carrying out surveillance, epidemiology, laboratory capacity, infection control, mitigation, communications, and other preparedness and response activities.
- ELC CARES: for monitoring key activities related to COVID-19 in the areas of epidemiology, laboratory, and informatics.
- <u>ELC Project Firstline:</u> for providing training curriculum on infection prevention & control knowledge and practices in healthcare.
- RPE Grant: for developing an advertising campaign for DHSS Sexual Violence Prevention Program, Rape Prevention and Education (RPE) grant using a public health approach.
- <u>Immunizations:</u> for planning and implementing COVID-19 vaccination services and to increase access to vaccinations for Vaccines for Children (VFC)-eligible children.

	RANK:	5	OF	14
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Department of Health and Senior Services		Budget Unit 58020C
Division of Community and Public Health		
COVID-19 Grant Authority NDI	DI# 1580003	HB Section 10.755
	-	

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

The federal authority requested is based on the grant amounts provided by grant guidance. The FTE request corresponds with how the Department of Health and Senior Services plans on utilizing grant funds.

5. BREAK DOWN THE REQUEST BY BUDG	ET OBJECT					FY ONE-TIM	E COSTS.		
	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req
	GR	GR	FED	FED	OTHER	OTHER	TOTAL	TOTAL	One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Applications Developer (14AS20)	0	0.0	29,801		0	0.0	29,801		0
Admin Support Assistant (02AM20)	0	0.0	25,309		0	0.0	25,309		0
Epidemiologist (19ED20)	0	0.0	98,190		0	0.0	98,190		0
Program Assistant (02PS10)	0	0.0	4,539		0	0.0	4,539		0
Public Health Program Assoc (19PH10)	0	0.0	50,738		0	0.0	50,738		0
Public Health Program Spec (19PH20)	0	0.0	17,950		0	0.0	17,950		0
Public Health Program Manager (19PH50)	0	0.0	60,863		0	0.0	60,863		0
Research/Data Analyst (02RD40)	0	0.0	17,315		0	0.0	17,315		0
Sr Research/Data Analyst (02RD40)	0	0.0	10,389		0	0.0	10,389		0
Program Manager (02PS50)	0	0.0	250,000		0	0.0	250,000		0
Total PS	0	0.0	565,094	0.00	0	0.0	565,094	0.00	0
In-State Travel (140)	0		58,143		0		58,143		0
Supplies (190)	0		568,478		0		568,478		0
Communication Services and Supplies (340)	0		2,633		0		2,633		0
Motorized Equipment (560)	0		557		0		557		0
Office Equipment (580)	0		46,038		0		46,038		0
Misc Expenses (740)	0	_	943,842		0	_	943,842		0
Total EE	0	_	1,619,691		0	•	1,619,691		0
Program Distributions (800)	0		1,767,204		0		1,767,204		0
Total PSD	0	•	1,767,204		0	•	1,767,204		0
Grand Total	0	0.0	3,951,989	0.00	0	0.0	3,951,989	0.00	0

De	partment of Health and Senior Services	Budget Unit 58020C
Dίν	ision of Community and Public Health	
СО	VID-19 Grant Authority NDI DI# 1580003	HB Section 10.755
6.	PERFORMANCE MEASURES (If new decision item has an associated co	re, separately identify projected performance with & without additional funding.)
6a.	Provide an activity measure(s) for the program.	6b. Provide a measure(s) of the program's quality.
	Measuring the activity of using these grants will track with the number of cases of COVID-19 in Missouri. If positive cases rise, then surveillance and mitigation efforts also rise. If the state is successful in addressing COVID-19 as a whole and cases decline, then COVID-19 related activities will also decline.	A key aspect of the received CDC grants is disseminating training curriculum on infection prevention and control to healthcare providers. Feedback from providers regarding the quality of the curriculum and any corresponding mitigation of COVID-19 spreading in a healthcare setting will measure the program's quality.
6c.	Provide a measure(s) of the program's impact.	6d. Provide a measure(s) of the program's efficiency.
	The program's impact will ultimately be measured in the state's ability to reduce cases of COVID-19 and mitigate deaths.	As these funds will primarily be used to bolster or expand existing efforts to address COVID-19, program efficiency is dependent on ensuring that ongoing programmatic functions are run efficiently and that funds are targeted at areas of need.

DEPT REQ

EX 2022

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EX 2022

BUDGET

FY 2021

DECISION ITEM DETAIL

SECURED

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00.0		00.0	0\$	00.0	0\$	00.0	0\$	OTHER FUNDS
00.0		00.0	43'621'660	00.0	0\$	00.0	0\$	PEDERAL FUNDS
00.0		00.0	0\$	00.0	0\$	00.0	0\$	GENERAL REVENUE
00.0	0\$	00.0	066'196'8\$	00.0	0\$	00.0	0\$	датот пи аяв
00.0	0	00.0	402,737,r	00.0	0	00.0	0	QQ - JATOT
0.00	0	00.0	1,767,204	00.0	0	00.0	0	PROGRAM DISTRIBUTIONS
00.0	0	00.0	169'619'1	00.0	0	00.0	0	33 - JATOT
00.0	0	00.0	248,842	00.0	0	00.0	0	WISCELLANEOUS EXPENSES
00.0	0	00.0	8£0'9ħ	00.0	0	00.0	0	OFFICE EQUIPMENT
0.00	0	00.0	Z 99	00.0	0	00.0	0	MOTORIZED EQUIPMENT
0.00	0	00.0	2,633	00.0	0	00.0	0	COMMUNICATION SERV & SUPP
0.00	0	00.0	874,883	00.0	0	00.0	0	SUPPLIES
0.00	0	00.0	£41,83	0.00	0	00.0	0	TRAVEL, IN-STATE
0.00	0	00.0	960'999	00.0	0	00.0	0	29 - JATOT
00.0	0	00.0	1 98'09	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM MANAGER
0.00	0	00.0	096 [°] ۲۱	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM SPEC
0.00	0	00.0	867,03	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM ASSOC
0.00	0	00.0	061,86	00.0	0	00.0	0	EPIDEMIOLOGIST
0.00	0	00.0	108,62	00.0	0	00.0	0	APPLICATIONS DEVELOPMENT SPEC
00.0	0	00.0	68£,01	00.0	0	00.0	0	SENIOR RESEARCH/DATA ANALYST
00.0	0	00.0	315,71	00.0	0	00.0	0	RESEARCH/DATA ANALYST
0.00	0	00.0	220,000	00.0	0	00.0	0	РРОСРАМ МАИВСЕЯ
00.0	0	00.0	689'₺	00.0	0	00.0	0	TNATSISSA MAAJOOAA
00.0	0	00.0	52,309	00.0	0	00.0	0	TNATSISSA TAO99US NIMDA
								COVID-19 Grant Authority NDI - 1580003
								OFFICE OF EMERGENCY COORD
СОГЛШИ	СОГЛШИ	ЭТЯ	DOLLAR	3T4	DOLLAR	3T7	DOLLAR	Budget Object Class

BUDGET

FY 2021

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ACTUAL

LA 5050

AUTDA

LA 5050

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Decision Item

Budget Unit

OF

Budget Unit 58020C

14

RANK:

Department of Health and Senior Services

based on new legislation, does request tie to TAFP fiscal note? If not, explain why.)

	nmunity and F									
ELC Enhancing	Detection Gr	ant		DI# 1580004	HB Section	10.755	<u>-</u>			
1. AMOUNT OF	REQUEST									
		FY 2022 Budg	get Request			FY	2022 Governor	's Recommendatio	n	
	GR	Federal	Other	Total		GR	Federal	Other	Total	
PS	0	542,764	0	542,764	PS	0	0	0	0	
EE	0	24,346,784	0	24,346,784	EE	0	0	0	0	
PSD	0	109,748,065	0	109,748,065	PSD	0	0	0	0	
TRF	0	0	0	0	TRF	0	0	0	0	
Total	0	134,637,613	0	134,637,613	Total	0	0	0	0	
FTE	0.00	13.00	0.00	13.00	FTE	0.00	0.00	0.00	0.00	
Est. Fringe	0	362,387	0	362,387	Est. Fringe	0	0	0	0	
Note: Fringes b	udgeted in Hou		for certain fri			es budgeted in F	louse Bill 5 exce	ot for certain fringes	budgeted	
directly to MoDC	DT, Highway Pa	atrol, and Consei	vation.		directly to M	oDOT, Highway	Patrol, and Cons	servation.		
	· · · · · · · · · · · · · · · · · · ·						·			
2. THIS REQUE	ST CAN BE C	ATEGORIZED A	\S:							
	New Legislati	ion			New Program		Fu	nd Switch		
	Federal Mand	date	_		Program Expansion		Co	st to Continue		
	GR Pick-Up		•		Space Request		Eq	uipment Replaceme	ent	
	Pay Plan		•	Х	Other: Federal Grai	nt Authority				
	_		•		<u> </u>	•				
3. WHY IS THIS	FUNDING NE	EDED? PROV	IDE AN EXP	LANATION FO	R ITEMS CHECKED IN #2.	INCLUDE THE	FEDERAL OR	STATE STATUTOR	Y OR CONSTIT	UTIONA
AUTHORIZATIO	N FOR THIS I	PROGRAM.								
The CDC's Epic	demiology and	Laboratory Capa	acity (FLC) -	Enhanced Dete	ction (ED) Grant has been r	eceived by the [Department of He	alth and Senior Sen	vices (DHSS) ar	nd
					vities include, but are not lim					
					tify need for targeted mitigate					
					ove the capacities of the ep					
					ulnerable populations (includ					
					lectronic data exchange to e					
					inment measures.	nazio omoloni u		ioo otato oi mioo	oan, milato oao	

The federal authority requested is based on the grant amount provided by the CDC through its ELC ED Grant. The FTE request corresponds with how the Department of Health and Senior Services plans on utilizing grant funds.

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If

RANK: 5 OF 14

Department of Health and Senior Services

Division of Community and Public Health

ELC Enhancing Detection Grant DI# 1580004 HB Section 10.755

5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.

	Dept Req GR	Dept Req GR	Dept Req FED	Dept Req FED	Dept Req OTHER	Dept Req OTHER	Dept Req TOTAL	TÖTAL	Dept Req One-
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	Time
Progam Coordinator (02PS40)	0	0.00	53,251	1.00	0	0.00	53,251	1.00	
Grant Supervisor (11GR40)	0	0.00	52,500	1.00	0	0.00	52,500	1.00	
Laboratory Support Assistant (19LB10)	0	0.00	181,494	6.00	0	0.00	181,494	6.00	
Laboratory Supervisor (19LB70)	0	0.00	115,512	2.00	0	0.00	115,512	2.00	
Laboratory Scientist (19LB50)	0	0.00	34,995	1.00	0	0.00	34,995	1.00	
Sr. Laboratory Scientist (19LB60)	0	0.00	47,256	1.00	0	0.00	47,256	1.00	
Laboratory Manager (19LB80)	0	0.00	57,756	1.00	0	0.00	57,756	1.00	
Total PS	0	0.0	542,764	13.00	0	0.0	542,764	13.00	0
In-State Travel (140)	0		65,000		0		65,000		0
Supplies (190)	0		12,272,203		0		12,272,203		0
Communication Services and Supp (340)	0		12,490				12,490		1,885
Professional Services (400)	0		9,789,007		0		9,789,007		0
Motorized Equipment (560)	0		4,998		0		4,998		0
Office Equipment (580)	0		198,134		0		198,134		88,400
Other Equipment (590)	0		1,177,000		0		1,177,000		0
Misc. Expense (740)	0		827,952		0		827,952		0
Total EE	0		24,346,784		0		24,346,784		90,285
Program Distributions (800)	0		109,748,065		0		109,748,065		0
Total PSD	0	-	109,748,065	•	0	_	109,748,065		0
Grand Total	0	0.0	134,637,613	13.00	0	0.0	134,637,613	13.00	90,285

	RANK: _	5		OF	14	
	epartment of Health and Senior Services			Budget Unit	58020C	
	vision of Community and Public Health					
EL	LC Enhancing Detection Grant DI# 1580004			HB Section	10.755	
6.	PERFORMANCE MEASURES (If new decision item has an associated	l core,	separa	ately identify	projected performance with & without additional funding.)	
6a	. Provide an activity measure(s) for the program.			6b. Provide a	a measure(s) of the program's quality.	
	The activity of the grant's usage will span multiple facets of the COVID-19 pandemic response. A pertinent activity will be contact tracing, as the department and local health departments will be able to even more robus trace contacts of people who have tested positive for COVID-19. There we be a duality in evaluating this measure, as an increase in the number of contacts identified will be expected with the successful implementation of grant, yet a decline in contacts over time will be an indicator of successful responding to the pandemic as positive cases decline.	tly ill the		quality in of the dep the funds Missouria	ring the multi-million dollar effort represented by the CDC's ELC ED grant, a all parts of the program will be necessary. Key to evaluating the quality epartment's usage of these federal funds will be the success of deploying is to assist in the local response to COVID-19 and ensuring that ans needing to be tested for COVID-19 receive a test and results in a and expeditious manner.	
60	. Provide a measure(s) of the program's impact.			6d. Provide a	a measure(s) of the program's efficiency.	
	The program's impact will ultimately be measured in the state's ability to reduce cases of COVID-19 and mitigate deaths.				ified area of where efficiency can be improved is in equipping the i State Public Health Lab with the resources and infrastructure to receive	

7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:

N/A

and convey data.

and convey data.

**An area identified for improving program efficiency will be equipping the Missouri State Public Health Lab with the resources and infrastructure to receive

SECNKED

SECNKED

DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

00.0		00.0	0\$	00.0	0\$	00.0	0\$	OTHER FUNDS
00.0		13.00	\$19,7£8,4£1\$	00.0	0\$	00.0	0\$	FEDERAL FUNDS
00.0		00.0	0\$	00.0	0\$	00.0	0\$	GENERAL REVENUE
00.0	0\$	13.00	£19,758,4£1\$	00.0	0\$	00.0	0\$	датот пияяэ
00.0	0	00.0	390,847,60r	00.0	0	00.0	0	αq - JATOT
00.0	0	00.0	390,847,901	00.0	0	00.0	0	PROGRAM DISTRIBUTIONS
00.0	0	00.0	787,346,784	00.0	0	00.0	0	33 - JATOT
00.0	0	00.0	236,728	00.0	0	00.0	0	WISCELLANEOUS EXPENSES
00.0	0	00.0	000,771,1	00.0	0	00.0	0	OTHER EQUIPMENT
00.0	0	0.00	₽£1,891	00.0	0	00.0	0	OFFICE EQUIPMENT
00.0	0	0.00	866'₺	00.0	0	00.0	0	MOTORIZED EQUIPMENT
00.0	0	0.00	700,687,6	00.0	0	00.0	0	PROFESSIONAL SERVICES
00.0	0	0.00	ا2'460	00.0	0	00.0	0	COMMUNICATION SERV & SUPP
00.0	0	0.00	12,272,203	00.0	0	00.0	0	SUPPLIES
00.0	0	0.00	000'99	00.0	0	00.0	0	TRAVEL, IN-STATE
00.0	0	13.00	£42,764	00.0	0	00.0	0	29 - JATOT
00.0	0	00.1	997,78	00.0	0	00.0	0	LABORATORY MANAGER
00.0	0	2.00	115,512	00.0	0	00.0	0	LABORATORY SUPERVISOR
00.0	0	00.1	992,74	00.0	0	00.0	0	SENIOR LABORATORY SCIENTIST
00.0	0	00.1	34,995	00.0	0	00.0	0	LABORATORY SCIENTIST
00.0	0	00.9	767°181	00.0	0	00.0	0	TNATSISSA TAO99US YAOTAAOAA
00.0	0	00.1	92,500	00.0	0	00.0	0	GRANTS SUPERVISOR
00.0	0	00.1	133,251	00.0	0	00.0	0	РКОСКАМ СООКПИАТОК
								ELC Enhanced Detection NDI - 1580004
								OFFICE OF EMERGENCY COORD
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	Budget Object Class

BUDGET

FY 2021

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AUTDA

EX 2020

AUTDA

LA 5050

Decision Item

Budget Unit

RANK: 5

Department of H	Health and Senior	Services			Budget Unit	58032C & 580	40C		
Division of Com	nmunity and Publ								
Missouri Coron	ers Training Fund	1 t) # 1580002		HB Section	10.620 & 10.7	61		
1. AMOUNT OF	REQUEST								
	FY	2022 Budo	et Request			FY 202	2 Governor's	Recommend	ation
		ederal	Other	Total		GR	Federal	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	1,200	1,200	EE	0	0	0	0
PSD	0	0	355,482	355,482	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	0	0	356,682	356,682	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes bu	udgeted in House I	Bill 5 excep	t for certain fr	inges	Note: Fringe	s budgeted in I	House Bill 5 ex	xcept for certa	in fringes
budgeted directly	to MoDOT, Highv	vay Patrol,	and Conserva	ation.	budgeted dire	ectly to MoDOT	^r , Highway Pa	trol, and Cons	ervation.
	ssouri Coroners Tr		,						
	ST CAN BE CATE	GORIZED	AS:		N D				
X	_New Legislation		_	Х	New Program	_		Fund Switch	
	_Federal Mandate		_		Program Expansion	_		Cost to Continu	
	_GR Pick-Up		_		Space Request	_		Equipment Rep	Diacement
	_Pay Plan		_		Other:				

Section 58.208, RSMo, was created by HB 2046 and passed during the 2020 Regular Session. The statute establishes the Missouri state coroners' training fund, providing that the fund is to be used by the Missouri Coroners' and Medical Examiners' Association to provide training to coroners. Coroners will be required to complete the training to be capable of attesting to the cause of death when a death is registered with the state. The funding will be generated from a statutorily required one dollar fee collected for each certified copy of a death certificate issued in Missouri. The appropriation is necessary for the fund to be made available

to the association and cannot be utilized by the Department of Health and Senior Services by statute.

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RANK:	5	OF	14	

Division of Community and Public Health	
Missouri Coroners Training Fund DI# 1580002	HB Section 10.620 & 10.761

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

The Bureau of Vital Records (BVR) and Local Public Health Agencies (LPHAs) issue an average of 355,482 death certificates each year. Section 58.208, RSMo, created an additional one dollar fee for each death certificate issued by the state registrar or a local registrar. Actual dollars generated by the fee will vary from year to year depending on the number of certified copies of death certificates issued to Missourians.

5. BREAK DOWN THE REQUEST BY BL	IDGET OBJECT	ΓCLASS, JO	B CLASS, AN	ID FUND SO	URCE. IDEN	TIFY ONE-TI	ME COSTS.		
	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req
	GR	GR	FED	FED	OTHER	OTHER	TOTAL	TOTAL	One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Refund (780)	0		0		1,200		1,200		0
Total EE	0		0		1,200		1,200		0
Program Distributions (800)	0		0		355,482		355,482		0
Total PSD	0		0		355,482		355,482		0
Grand Total	0	0.0	0	0.0	356,682	0.0	356,682	0.0	0

RANK:5_	OF <u>14</u>
Department of Health and Senior Services	Budget Unit 58032C & 58040C
Division of Community and Public Health	
Missouri Coroners Training Fund DI# 1580002	HB Section 10.620 & 10.761
6. PERFORMANCE MEASURES (If new decision item has an associated co	re, separately identify projected performance with & without additional funding.)
6a. Provide an activity measure(s) for the program.	6b. Provide a measure(s) of the program's quality.
The activity resulting from the funding will be measured by the number of coroners who are trained by the Missouri Coroners' and Medical Examiners' Association. The Association is required by statute to submit a list of coroners completing their training to the department.	As the training will be conducted by the Missouri Coroners' and Medical Examiners' Association, any evaluation of quality will need to be performed by the Association. Options available to them would include surveys of participants or comparisons of hypothetical pre- and post- test scores.
6c. Provide a measure(s) of the program's impact.	6d. Provide a measure(s) of the program's efficiency.
The impact of the funding will be reflected in more accurate vital records, resulting in less of a need for corrections to be made to vital record documents.	Efficiency may be evaluated based on the ability of trainings to be provided to all coroners across the State of Missouri within a reasonable amount of time. The capability of the program to execute all training activities with the funds generated by the new one dollar fee will also be paramount to its efficiency.
7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARG	ETS:

DECISION ITEM SUMMARY

								сокоиека: ткании егип
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T4	DOLLAR	3T7	DOLLAR	bnui
SECURED	SECURED	рерт кед	DEPT REQ	BUDGET	BUDGET	AUTDA	AUTOA	Budget Object Summary
*****	*****	EA 2022	FY 2022	FY 2021	FY 2021	EA 2020	FY 2020	Decision Item
								Budget Unit

GRAND TOTAL	0\$	00.0	0\$	00.0	\$355.482	00.0	0\$	00.0
∆A TOT	0	00.0	0	00.0	322,482	00.0	0	00.0
G9 - JATOT	0	00.0	0	00.0	365,482	00.0	0	00.0
Coroner's Training Fund - 1580002 PROGRAM-SPECIFIC MO CORONERS TRAINING FUND	0	00.0	0	00.0	392,482	00.0	0	00.0
Coronor's Training Fund - 1580002								

9/21/20 10:38 im_disummary

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	GENERAL REVENUE	0\$	00.0	0\$	00.0	0\$	00.0		00.0
DATOT GNARD		0\$	00.0	0\$	00.0	\$1,200	00.0	0\$	00.0
Q9 - JATOT		0	00.0	0	00.0	1,200	00.0	0	00.0
REFUNDS	•	0	00.0	0	00.0	1,200	00.0	0	00.0
Coroner's Training Fund	d - 1580002								
REFUNDS									
Budget Object Class	ss	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	3T7	СОГЛШИ	СОГЛШИ
Decision Item		AUTOA	AUTOA	BUDGET	BUDGET	реят кед	DEPT REQ	SECNKED	SECNBED
Budget Unit		FY 2020	E A 5050	FY 2021	FY 2021	FY 2022	FY 2022	******	*****

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OTHER FUNDS

FEDERAL FUNDS

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00.0 00.0 00.0 00.0		00.0 00.0 00.0	0\$ 0\$ 0\$	00.0 00.0 00.0	0\$ 0\$ 0\$	00.0 00.0 00.0	0\$ 0\$ 0\$	GENERAL REVENUE FEDERAL FUNDS SUND3 STHTO
00.0	0\$	00.0	\$322,482	00.0	0\$	00.0	0\$	JATOT GNARĐ
00.0	0	00.0	395,482	00.0	0	00.0	0	G9 - JATOT
00.0	0	00.0	355,482	00.0	0	00.0	0	Coroner's Training Fund - 1580002 PROGRAM DISTRIBUTIONS
								CORONERS' TRAINING FUND
СОГЛШИ	СОГЛШИ	ЭТЭ	DOLLAR	ЭТЭ	DOLLAR	ЭТЯ	DOLLAR	Budget Object Class
SECURED	SECURED	рерт кед	DEPT REQ	BUDGET	BUDGET	AUTOA	AUTOA	Decision Item
******	******	FY 2022	E A 5055	FY 2021	FY 2021	LA 5050	E A 5050	Budget Unit

P8 to 84 egs⁴

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58065C
Division of Community and Public Health		
Core - State Public Health Laboratory	HB Section	10.765

1. CORE FINANCIAL SUMMARY

		FY 2022 Budg	et Request			FY 2022 Governor's Recommendation			
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	1,911,534	1,044,812	1,790,703	4,747,049	PS	0	0	0	0
EE	868,945	1,797,776	5,997,898	8,664,619	EE	0	0	0	0
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	2,780,479	2,842,588	7,788,601	13,411,668	Total	0	0	0	0
FTE	44.18	19.70	39.13	103.01	FTE	0.00	0.00	0.00	0.00
Est. Fringe	1,253,741	622,787	1,142,779	3,019,307	Est. Fringe	0	0	0	0
Note: Fringes b	udgeted in House	Bill 5 except fo	r certain fringes	s budgeted	Note: Fringes k	budgeted in Hous	e Bill 5 except	for certain fring	es budgeted

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

Other Funds: Missouri Public Health Services (0298), Safe Drinking Water (0679), and Childhood Lead Testing (0899).

2. CORE DESCRIPTION

The State Public Health Laboratory (SPHL) is vitally important to public health. It provides a broad range of disease control and surveillance, preventive healthcare, emergency preparedness, all-hazards laboratory response, environmental monitoring, and laboratory improvement services. The SPHL operates specialty units in Jefferson City and Poplar Bluff that provide services to physicians, veterinarians, law enforcement officials, local and district public health personnel, hospitals, and private laboratories. The SPHL conducts testing in the fields of immunology, virology, microbiology, tuberculosis, chemistry, environmental bacteriology, advanced molecular detection, and newborn screening that allow medical practitioners to identify harmful conditions and provide appropriate treatment. The SPHL also conducts analyses of water and food to assure its safe use. The SPHL is the state reference laboratory, serving the department, local health agencies, and medical professionals and institutions throughout Missouri by confirming results or completing organism identification. The SPHL is the leader in the state for acquiring and implementing advanced technologies and methodologies to detect newly emerging or re-emerging diseases of public health consequence. Examples include: COVID-19, Zika, Ebola, Dengue, Chikungunya, Middle-East Respiratory Syndrome (MERS), foodborne diseases, rabies, pandemic strains of influenza, antibiotic-resistant bacteria, mumps, sexually transmitted diseases (syphilis, HIV, chlamydia, gonorrhea), and drug-resistant tuberculosis. Much of this testing occurs in specially designed laboratories (Bio-Safety Level 3) and require extensive technical and safety training. Serving as the primary state response laboratory for biological and chemical terrorism events, the SPHL also conducts program evaluations for municipal, hospital, and private laboratories; supports public safety programs (implied consent/breath alcohol); and supervises certifications and operations of breath alcohol analyzers. Many

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58065C
Division of Community and Public Health		
Core - State Public Health Laboratory	HB Section	10.765

3. PROGRAM LISTING (list programs included in this core funding)

State Public Health Laboratory

4. FINANCIAL HISTORY

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	11,384,858	12,292,950	13,440,790	13,411,668
Less Reverted (All Funds)	(63,630)	(64,079)	(77,774)	(80,305)
Less Restricted (All Funds)*	,	0	0	(103,625)
Budget Authority (All Funds)	11,321,228	12,228,871	13,363,016	13,227,738
Actual Expenditures (All Funds)	10,257,656	10,395,302	11,361,079	N/A
Unexpended (All Funds)	1,063,572	1,833,569	2,001,937	N/A
Unexpended, by Fund: General Revenue Federal Other	75,708 222 987,642	1,168 229,921 1,602,479	103,067 377,226 1,521,643	N/A N/A N/A

^{12,000,000} 11.361.079 11,000,000 10,395,302 10,257,656 10,000,000 *Current Year restricted amount is as of 7/01/2020. FY 2018 FY 2019 FY 2020

13,000,000

Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: Lapse in other funds is mainly due to staff turnover, timing of invoice payments, and strategic implementation preparation for the Niemann-Pick method.

Actual Expenditures (All Funds)

DEPARTMENT OF HEALTH & SENIOR SERVING STATE PUBLIC HEALTH LAB

5. CORE RECONCILIATION DETAIL

	899,114,51	109,887,7	2,842,588	2,780,479	10.501	Total			
	0	0	0	0	00.0				
	619' 1 99'8	868,766,8	9۲۲,۲6۲,۱	9 1 6'898	00.0	33			
	6 † 0' \ †\'†	1,190,703	1,044,812	₱89'II6'I	10.501	Sd			
							TS∃N	RE REQ	DEPARTMENT CO
	(0)	0	0	0	(00.0)	SEDNAH	ИЕИТ С	ИТЯАЧЭ(NET D
planned expenditures.									
no based anoitsoolsen Internal	(35,000)	0	(35,000)	0	00.0	ЬD	9714	481	Core Reallocation
planned expenditures.									
Internal reallocations based on	(000,1)	0	0	(000,1)	00.0	ЪD	0220	681	Core Reallocation
planned expenditures.									
Internal reallocations based on	۱٬000	0	0	۱,000	00.0	33	0220	681	Core Reallocation
planned expenditures.									
Internal reallocations based on	32,000	0	32'000	0	00.0	33	971 <i>t</i>	681	Core Reallocation
planned expenditures.									
Internal reallocations based on	(0)	0	0	0	00.0	Sd	カイト4	186	Core Reallocation
planned expenditures.									
Internal reallocations based on	0	0	0	0	(00.0)	Sd	0222	481	Core Reallocation
						STN	BMT SU	ILQA 39	DEPARTMENT CO
	899'117'81	109,887,7	2,842,588	2,780,479	10.501	Total			
	000,88	0	32,000	000,1	00.0	DD			
	8,628,619	868'466'9	۱,762,776	9 7 6'298	00.0	33			
	6 7 0'2 7 2' 7	٤٥٢,06٢,١	218,440,1	₱£9'II6'I	103.01	Sd			
								SEC	ТЭV ЯЭТЭА ЧЭАТ
		10112	In lanc -						
anoitanation	IstoT	Other	Federal	ЯЭ	3T7	Class			
						Budget			

DEPARTMENT OF HEALTH & SENIOR SERVING STATE PUBLIC HEALTH LAB

5. CORE RECONCILIATION DETAIL Budget Class FTE GR Federal Other Total Explanation

899,114,61	109,887,7	2,842,588	2,780,479	10.501	IstoT
0	0	0	0	00.0	ЬD
619,439,8	868,766,3	9۲۲,۲9۲,۱	946,898	00.0	33
6 ታ 0'ረ ታ ረ'ታ	1,790,703	218,440,1	763,119,1	103.01	Sd
					ORE

DECISION ITEM SUMMARY

2ECNKED

DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

2ECNKED

00.0	0\$	10.701	\$14'114'224	103.01	899'117'81\$	69.68	192,282,11\$	GRAND TOTAL	
00.0	0	4.00	988,207	00.0	0	00.0	0	JATOT	
00.0	0	00.0	<u></u>	00.0	0	00.0	0	33 - JATOT	
00.0	0	00.0	669'779	00.0	0	00.0	0	EXPENSE & EQUIPMENT DHSS-FEDERAL AND OTHER FUNDS	
00.0	0	4.00	181,831	00.0	0	00.0	0	29 - JATOT	
00.0	0	4.00	781,831	00.0	0	00.0	0	DHSS-FEDERAL AND OTHER FUNDS	
								Food Safety and Testing Capac - 1580008	
00.0	0	10.501	899'II 7 'EI	10.501	899'117'81	69.68	192,282,11	JATOT	
00.0	0	00.0		00.0	<u>000,8£</u>	00.0	998,91	Q9 - JATOT	
00.0	0	00.0	0	00.0	32,000	00.0	998,91	DHSS-FEDERAL AND OTHER FUNDS	
00.0	0	00.0	0	00.0	٥٥٥,١	00.0	0	CENEKYT KENENNE bKOCKYW-SbECILIC	
00.0	0	00.0	619'799'8	00.0	8,628,619	0.00	۲,432,891	33 - JATOT	
00.0	0	00.0	896,34	00.0	896,34	00.0	979'91	CHILDHOOD LEAD TESTING	
00.0	0	00.0	149,674	00.0	149°EZ4	00.0	430,422	SAFE DRINKING WATER FUND	
00.0	0	00.0	688,774,6	00.0	688,774,8	00.0	727,808,4	MO PUBLIC HEALTH SERVICES	
00.0	0	00.0	9۲۲,۲6۲,۱	00.0	1,762,776	00.0	1,662,252	DHSS-FEDERAL AND OTHER FUNDS	
00.0	0	00.0	946,898	00.0	946,738	00.0	44 9,718	GENEKYF & EGNIBWENT EXBENSE & EGNIBWENT	
00.0	0	103.01	6ヤ0'᠘ヤ᠘'ヤ	103.01	6 7 0'2 7 2' 7	69.68	3,932,504	29 - JATOT	
00.0		09.0	797'81	05.0	797'81	00.0	0	CHILDHOOD LEAD TESTING	
00.0	0	59.85	1,772,239	59.85	1,772,239	31.15	137,785,1	MO PUBLIC HEALTH SERVICES	
00.0	0	07.91	218,440,1	07.91	1,044,812	76.81	099'694	DHSS-FEDERAL AND OTHER FUNDS	
00.0	0	81.44	⊅ 89'116'1	81.14	789'II6'I	78.04	861,877,1	GENEKAL REVENUE GENERAL REVENUE	
								СОВЕ	
								SATE PUBLIC HEALTH LAB	
СОГПШИ	СОГЛШИ	ЭТЯ	ВОГГАВ	3T4	DOLLAR	3T7	ВОГГАВ	Pun∃	

BUDGET

FY 2021

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Budget Object Summary

Decision Item

Budget Unit

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EX 2022

DEPT REQ

EX 2022

СОГЛШИ	СОГЛШИ	3T4	DOLLAR	ЭТЭ	DOLLAR	317	DOLLAR	Budget Object Class
								STATE PUBLIC HEALTH LAB
								СОВЕ
00.0	0	00.0	0	1.00	31,924	22.1	9£7,8£	ADMIN OFFICE SUPPORT ASSISTANT
00.0	0	00.0	0	00.0	3,302	69.0	∠ ⊅ 9' ⊅ \	OFFICE SUPPORT ASSISTANT
00.0	0	00.0	0	2.00	28 99	2.16	686,339	SR OFFICE SUPPORT ASSISTANT
00.0	0	00.0	0	00.1	28,245	08.0	010,8	STOREKEEPERI
00.0	0	00.0	0	60.0	2,913	21.0	829,8	STOREKEEPER II
00.0	0	00.0	0	00.0	9	00.0	0	ACCOUNT CLERK II
00.0	0	00.0	0	00.1	43,040	00.1	42,460	II TNATNUOOOA
00.0	0	00.0	0	00.1	708,72	78.0	24,032	ACCOUNTING CLERK
00.0	0	00.0	0	00.1	914,08	00.1	30,222	ACCOUNTING TECHNICIAN
00.0	0	00.0	0	00.0	200	00.0	0	ACCOUNTING GENERALIST I
00.0	0	00.0	0	00.1	38,382	00.1	671,8E	ACCOUNTING GENERALIST II
00.0	0	00.0	0	00.0	606	11.0	3,822	HEALTH PROGRAM REP I
00.0	0	00.0	0	1.30	187,88	80.1	۲0۱,64	HEALTH PROGRAM REP II
00.0	0	00.0	0	00.0	698'₺	94.8	294,000	ASSOC PUBLIC HLTH LAB SCIENTST
00.0	0	00.0	0	30.15	058,704,1	15.28	778,828	PUBLIC HEALTH LAB SCIENTIST
00.0	0	00.0	0	18.10	668'608	16.04	916,357	SENIOR PUBLIC HLTH LAB SCINTST
00.0	0	00.0	0	7 6.0	121,04	46 .0	38,295	WEDICAL TECHNOLOGIST II
00.0	0	00.0	0	00.0	0	£9.1	612,84	LABORATORY SUPPORT TECH I
00.0	0	00.0	0	44.11	340,638	9 ^{7.} 6	649,062	LABORATORY SUPPORT TECH II
00.0	0	00.0	0	3.00	214,201	19.2	699'96	LABORATORY SUPPORT SPV
00.0	0	00.0	0	2.00	207,27	08.1 50.1	7 99'89	LABORATORY SUPPORT COORD
00.0	0	00.0	0	00.1	094,78	70.1	1 06'99	FACILITIES OPERATIONS MGR B1
00.0	0	00.0	0	06.1	136,093	⊅6 [.] ľ	129,685	FISCAL & ADMINISTRATIVE MGR B1
00.0	0	00.0	0	00.01	191,233	68.81	394,840,1	LABORATORY MGR B1
00.0	0	00.0	0	00.0	Z S	00.0	0	LABORATORY MANAGER B2
00.0	0	00.0	0	00.0	11	00.0	0	LABORATORY MGR B3
00.0	0	00.0	0	96.1	128,730	£7.0	670,632	HEALTH & SENIOR SVCS MANAGER 1
00.0	0	00.0	0	09.1	697,65	82.1	206'99	PROJECT SPECIALIST
00.0	0	7E.0	24,488	7£.0	24,488	45.0 10.0	22,406	FEGAL COUNSEL
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BUDGET

FY 2021

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Decision Item

Budget Unit

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DEPT REQ

EX 2022

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Budget Object Class

Decision Item

Budget Unit

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19.70

109,887,7\$

889'778'7\$

39.13

19.70

00.0		81.44	67 1 ,087,2\$	81.44	6 7 4,08 7 , 2 \$	78.0 p	42,593,137	GENEKAL REVENUE
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00.0	0	00.0	0	00.0	36,000	00.0	998'91	Q9 - JATOT
00.0	0	00.0	0	00.0	36,000	00.0	998,91	DEBT SERVICE
00.0	0	00.0	619' 1 99'8	00.0	619,829,8	00.0	1,432,891	33 - JATOT
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00.0	0	00.0	000'₺	00.0	029,7	00.0	270	WISCELLANEOUS EXPENSES
00.0	0	00.0	009'914	00.0	167,180	00.0	584,818	OTHER EQUIPMENT
00.0	0	00.0	009'₺	00.0	000'₺	00.0	0	OFFICE EQUIPMENT
00.0	0	00.0	31,500	00.0	704,21	00.0	11,620	СОМРОТЕК ЕQUIРМЕМТ
								СОКЕ
								STATE PUBLIC HEALTH LAB
СОГЛИИ	СОГЛШИ	ЭТЯ	DOLLAR	317	ВОГГАВ	317	DOLLAR	Budget Object Class
SECURED	SECNEED	рерт кед	DEPT REQ	BUDGET	BUDGET	AUTOA	JAUTDA	Decision Item
******	******	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	上人 5050	Budget Unit

109,887,7\$

889'778'7\$

31.15

16.91

977'078'9\$

879,844,**2**\$

OTHER FUNDS

FEDERAL FUNDS

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00.0

00.0

Health and Senior Services

State Public Health Lab

Programs in found in the following core had pate:

Program is found in the following core budget(s):

	SPHL	Office of Emergency Coordination			TOTAL
GR	2,780,479	0			2,780,479
FEDERAL	2,842,588	1,598,934			4,441,522
OTHER	7,770,137	0			7,770,137
TOTAL	13,393,204	1,598,934			14,992,138

1a. What strategic priority does this program address?

To protect health and keep the people of Missouri safe.

1b. What does this program do?

The State Health Lab provides testing services for various diseases, pathogens, viruses, and chemicals within humans and natural resources, such as water, and animals.

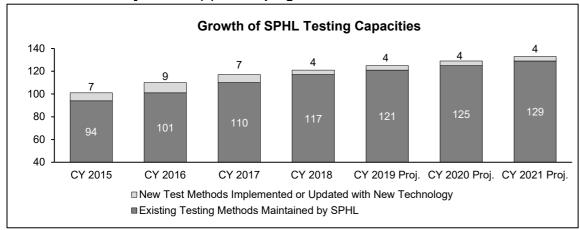
SPHL Operations	Testing Capacities	Newborn Screening	Breath Alcohol
Provides laboratory support in the	Tuberculosis	Missouri is currently screening for 33	Approves, disapproves, and issues
diagnosis and investigation of disease	• Rabies	(of 34) recommended core conditions	permits to law enforcement agencies in
and hazards that threaten public health.	Botulism toxin	(including hearing and critical	Missouri for chemical analysis of blood,
'	Anthrax	congenital heart defects screening)	breath, urine, or saliva for alcohol and
Maintains fully operational BSL-3	West Nile Virus	• 72 disorders and secondary	drugs.
laboratory.	Plague	conditions include the following	Approves evidential breath analyzers
Sample analysis and microbiologic	• Zika	o Primary Congenital Hypothyroidis	• •
identification.	Avian Flu	o Congenital Adrenal Hyperplasia	methods for instrument operations,
Assists in disease control and	Pandemic Influenza	o Hemoglobinopathy	inspections, quality control, training,
surveillance.	MERS-CoV	o Biotinidase Deficiency	and approval of training to assure
Reference and specialized testing.	• Ebola	o Galactosemia	standards meet state regulations.
• Food safety.	Sexually transmitted diseases	o Fatty Acid Disorders	
Emergency terrorism response.	Pathogenic bacteria	o Organic Acid Disorders	
	Various chemical contaminants	o Amino Acid Disorders	
	Legionella pneumophila	o Cystic Fibrosis	
	• SARS-CoV-2 (COVID-19)	o Lysosomal Storage Disorders	
		o Severe Combined-	
		Immunodeficiency (SCID)	
		o Spinal Muscular Atrophy (SMA)	

Health and Senior Services

HB Section(s): 10.755, 10.765 State Public Health Lab

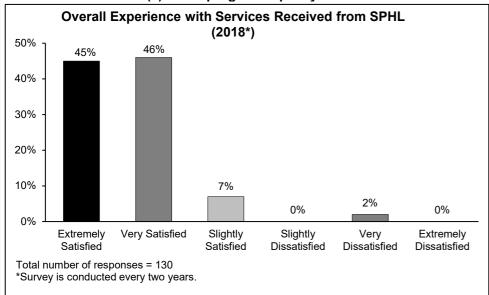
Program is found in the following core budget(s):

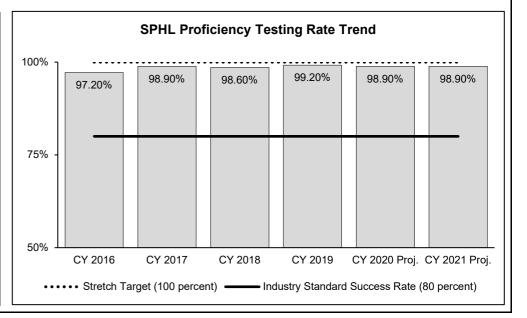
2a. Provide an activity measure(s) for the program.



The State Public Health Lab (SPHL) provides a variety of testing to Missourians and its visitors and is routinely implementing state of the art technology to provide more efficient and accurate testing. Tests implemented include new and emerging diseases, such as SARS-CoV-2 (COVID-19), Ebola, MERS-CoV, Zika, and antibiotic resistant bacteria, as well as expanding Newborn Screening disorder testing and providing a vast array of chemical and biological terrorism preparedness methods. SPHL is constantly working towards having the most current and advanced technologies to provide expanding services to meet the needs of its customers.

2b. Provide a measure(s) of the program's quality.





Health and Senior Services

State Public Health Lab

Program is found in the following core budget(s):

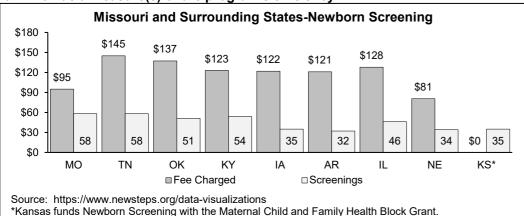
2c. Provide a measure(s) of the program's impact.

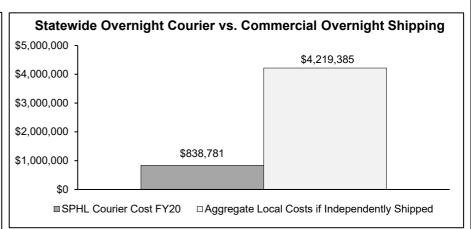
Laboratory Services Provided to All Missouri Citizens and Visitors							
FY 2020							
Analyses performed	>7,000,000						
Total Specimens/Samples tested (approx.)	226,335						
Sample Type Examples:							
Human Clinical	108,980						
Newborn Screening	95,844						
Drinking Water (serving 6+ million Missourians and 42+ million	66,284						
annual visitors)	00,204						
Rabies	2,072						
Food	1,424						
Soil/Paint	105						
Test kits distributed	293,303						
Total breath alcohol permits issued (Types I, II, and III)	3,079						
Regional Hospital Laboratory Training Sessions	5						
Hospital Laboratories Participating in Training							
Hospital Laboratory Professionals Trained	53						

Map of Public Health Courier Pick Up Sites Hospital pickup site Local Health Agency pickup site Springdale O Fayetteville

HB Section(s): 10.755, 10.765

2d. Provide a measure(s) of the program's efficiency.





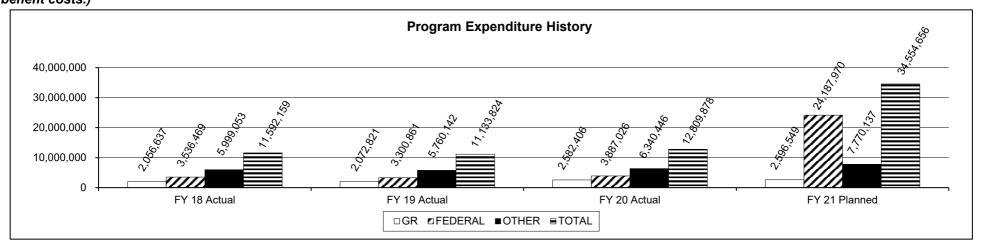
Health and Senior Services

State Public Health Lab

Program is found in the following core budget(s):

HB Section(s): 10.755, 10.765

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other" funds?

Federal funds consist of Department of Health and Senior Services Federal (0143) and Department of Health and Senior Services Federal Stimulus (2350). Other funds consist of Missouri Public Health Services (0298), Safe Drinking Water (0679), and Childhood Lead Testing (0899).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Chapter 196, RSMo; Sections 191.331-333, 191.653, 192.020, 192.050, 577.020, 577.037, 640.100-140, and 701.322, RSMo; Code of State Regulations 10 CSR 60-1.010, 19 CSR 20-20.080, 19 CSR 25-32.010, 19 CSR 25-34.010; and Clinical Laboratory Improvement Amendment (CLIA) Federal: 42 USC 263a.

6. Are there federal matching requirements? If yes, please explain.

Missouri Public Health Services Fund (0298) will provide match for newborn screening for the MCH Block Grant of \$4.5 million and the Safe Drinking Water Fund (0679) will provide match for the Public Health Emergency Preparedness Grant of \$125,000 in FY 2021.

7. Is this a federally mandated program? If yes, please explain.

No. However, in testing clinical human specimens, SPHL is regulated under the Clinical Laboratory Improvement Amendments (CLIA) - Federal - 42 USC 263a. The CLIA establishes quality standards for all laboratory testing to ensure the accuracy, reliability, and timeliness of patient test results regardless of where the test was performed.

OF

14

RANK:

Department of	Health and Sen	ior Services			Budget Unit 5	8065C				
State Public H	ealth Laborator	у			_					
Food Safety To	esting and Capa	city	D) # 1580008	HB Section 1	0.765				
1. AMOUNT O	F REQUEST									
	FY 2022 Budget Request					FY 202	2 Governor's	Recommenda	ation	
	GR	Federal	Other	Total		GR	Federal	Other	Total	
PS	0	158,187	0	158,187	PS	0	0	0	0	
EE	0	544,699	0	544,699	EE	0	0	0	0	
PSD	0	0	0	0	PSD	0	0	0	0	
TRF	0	0	0	0	TRF	0	0	0	0	
Total	0	702,886	0	702,886	Total	0	0	0	0	
FTE	0.00	4.00	0.00	4.00	FTE	0.00	0.00	0.00	0.00	
Est. Fringe	0	108,584	0	108,584	Est. Fringe	0	0	0	0	
Note: Fringes l	budgeted in Hous	se Bill 5 excep	t for certain fri	nges	Note: Fringes	budgeted in	House Bill 5 ex	cept for certai	in fringes	
budgeted direct	tly to MoDOT, Hig	ghway Patrol,	and Conserva	tion.	budgeted direc	budgeted directly to MoDOT, Highway Patrol, and Conservation.				
2. THIS REQUI	EST CAN BE CA	TEGORIZED	AS:							
	New Legislation				New Program		F	und Switch		
	Federal Mand				Program Expansion	_		Cost to Continu	ıe	
	GR Pick-Up		_		<u></u>			auipment Rer	olacement	

3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

Federal Grant

Other:

The Department of Health and Senior Services (DHSS) State Public Health Laboratory (SPHL) has applied for FDA cooperative agreement funding to increase capability and capacity in food testing areas where FDA has identified specific needs. The goals and outcomes of this cooperative agreement include the following:

- 1. SPHL, in support of Missouri's manufactured food regulatory programs (MFRPS), will conduct testing of targeted food samples using validated test methods and a quality management system.
- 2. The test results generated by SPHL will be shared with Missouri's MFRPS program and FDA partners.

Pay Plan

3. SPHL will participate in small scale method development, method validation research and matrix extensions as requested by FDA.

The expected outcome from the completion of the aims will be to protect the safety of the food supply and further increase public health. This project will strengthen and improve the collaboration of surveillance testing activities between the FDA, the Missouri MFRPS, and SPHL. Thus, advancing a national integrated food safety system.

RANK:	8	OF	14
	•	•	•

Department of Health and Senior Services		Budget Unit 58065C				
State Public Health Laboratory						
Food Safety Testing and Capacity	DI# 1580008	HB Section 10.765				

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

SPHL developed the grant budget from the guidance and activities required in the grant application. The additional testing and workload were estimated in order to determine the number of additional FTE and of Expenses and Equipment needed. The nature of this work does not allow outsourcing.

5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.

	Dept Req GR	Dept Req GR	Dept Req FED	Dept Req FED	Dept Req OTHER	Dept Req OTHER	Dept Req TOTAL	Dept Req TOTAL	Dept Req One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Laboratory Scientist (19LB50)	0	0.0	127,938	3.0	0	0.0	127,938	3.0	
Laboratory Support Assistant (19LB10)	0	0.0	30,249	1.0	0	0.0	30,249	1.0	
Total PS	0	0.0	158,187	4.0	0	0.0	158,187	4.0	0
Out-of-state travel (160)	0		29,561		0		29,561		
Supplies (190)	0		259,826		0		259,826		
Professional Development (320)	0		33,986		0		33,986		
Maintenance & Repairs (430)	0		102,576		0		102,576		
Equipment (590)	0		118,750		0		118,750		
Total EE	0		544,699		0		544,699		0
Grand Total	0	0.0	702,886	4.0	0	0.0	702,886	4.0	0

RANK: 8 OF 14

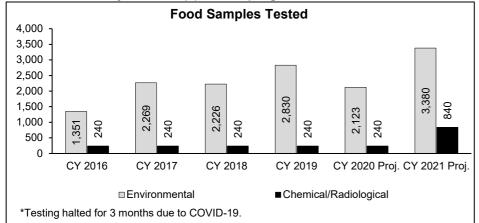
Department of Health and Senior Services
State Public Health Laboratory
Food Safety Testing and Capacity
DI# 1580008

Budget Unit 58065C

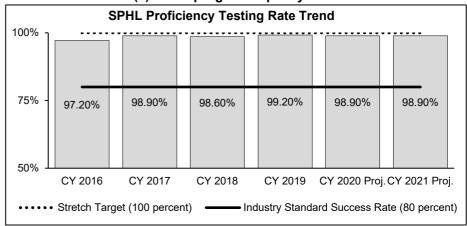
HB Section 10.765

6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)

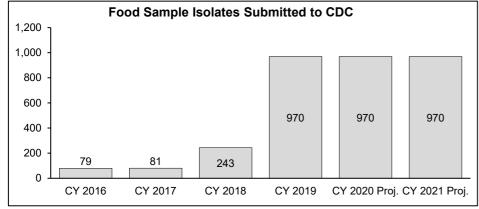
6a. Provide an activity measure(s) for the program.



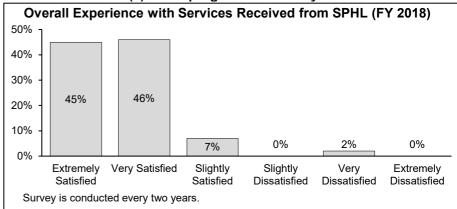
6b. Provide a measure(s) of the program's quality.



6c. Provide a measure(s) of the program's impact.



6d. Provide a measure(s) of the program's efficiency.



	RANK: 8	OF 14		
Department of Health and Senior Services		Budget Unit 58065C		
State Public Health Laboratory		<u> </u>		
Food Safety Testing and Capacity	DI# 1580008	HB Section 10.765		
7. STRATEGIES TO ACHIEVE THE PERFORMA	NCE MEASUREMENT TAR	GETS:		
1. By June 30, 2021, increase the number of so	cientists proficient in the curre	nt methods of food testing performed		
2. By June 30, 2021, acquire equipment funded			g of food samples.	

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00.0 00.0 00.0		00.0 00.4 00.0	0\$ 988'Z0 Z \$ 0\$	00.0 00.0 00.0	0\$ 0\$ 0\$	00.0 00.0 00.0	0\$ 0\$ 0\$	GENERAL REVENUE FEDERAL FUNDS OTHER FUNDS
00.0	0\$	4.00	988,207\$	00.0	0\$	00.0	0\$	датот пи яя
00.0	0	00.0	669'779	00.0	0	00.0	0	33 - JATOT
00.0	0	00.0	097,811	00.0	0	00.0	0	OTHER EQUIPMENT
00.0	0	00.0	102,576	00.0	0	00.0	0	M&R SERVICES
00.0	0	00.0	986,88	00.0	0	00.0	0	PROFESSIONAL DEVELOPMENT
00.0	0	00.0	928,826	00.0	0	00.0	0	SUPPLIES
00.0	0	00.0	199,62	00.0	0	00.0	0	TRAVEL, OUT-OF-STATE
00.0	0	00.₽	181,831	00.0	0	00.0	0	29 - JATOT
00.0	0	3.00	127,938	00.0	0	00.0	0	LABORATORY SCIENTIST
00.0	0	1.00	30,249	00.0	0	00.0	0	STATE PUBLIC HEALTH LAB Food Safety and Testing Capac - 1580008 LABORT SCALORY SUPPORT ASSISTANT
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	ЭТЯ	DOLLAR	3T4	DOLLAR	Budget Object Class

BUDGET

FY 2021

BUDGET

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EX 2022

ACTUAL

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LA 5050

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Decision Item

Budget Unit

Division of Senior & Disability Services

CORE DECISION ITEM

Health and Sen	ior Services				Budget Unit	58241C			
Senior and Disa	ability Services				_				
Core - Senior a	nd Disability Ser	vices Program	Operations		HB Section	10.800			
1. CORE FINAL	NCIAL SUMMARY	Y							
		FY 2022 Budge	et Request			FY 202	2 Governor's	Recommendati	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	10,269,400	11,690,617	0	21,960,017	PS	0	0	0	0
EE	1,002,716	1,151,080	0	2,153,796	EE	0	0	0	0
PSD	865,000	930,000	0	1,795,000	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	12,137,116	13,771,697	0	25,908,813	Total	0	0	0	0
FTE	264.44	250.82	0.00	515.26	FTE	0.00	0.00	0.00	0.00
Est. Fringe	7,116,078	7,395,452	0	14,511,530	Est. Fringe	0	0	0	0
_	udgeted in House DT, Highway Patro	•	•	s budgeted		s budgeted in Hous DOT, Highway Pat			es budgeted

2. CORE DESCRIPTION

This core funding supports staff and operations of the Division of Senior and Disability Services (DSDS). DSDS is comprised of the Office of the Division Director; the Bureau of Senior Programs; the Financial Support Unit; the Section of Home and Community Based Services which includes: the Bureau of Home and Community Services, the Bureau of Long Term Services and Supports, and the Home and Community Based Services Intake and Person Centered Care Plan Call Center, and the Section of Adult Protective Services (APS) which includes: the Protective Services Unit, the Bureau of APS and Staff Development, the Bureau of APS Intake (Central Registry Unit), and the Special Investigations Unit. DSDS plays a crucial role as the state unit on aging and is the primary agency that oversees, monitors, and assures the health and safety of seniors and adults with disabilities receiving long-term care in their home or community as an alternative to facility-based care. DSDS investigates allegations of abuse, neglect, and financial exploitation of seniors and adults with disabilities; registers hotlines and regulatory complaints regarding care; informs individuals considering long-term care about home-based care options; provides oversight for eligibility determinations and authorizations of Home and Community-Based Services (HCBS); advocates for resident rights and resolves complaints regarding nursing facility care; provides customer service to seniors and adults with disabilities and their caregivers; and oversees the Older Americans Act funded programs administered by the Area Agencies on Aging.

Funding is utilized to support adult protective service activities, crisis intervention, complaint investigation, and quality assurance activities as mandated under Chapters 197, 198, 208, 565, 570, and 660, RSMo; participation in the Medicaid State Plan, the Aged and Disabled Waiver, the Adult Day Care Waiver, and the Independent Living Waiver (1915c) (Centers for Medicare and Medicaid Services); and the Older Americans Act.

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58241C
Senior and Disability Services	-	
Core - Senior and Disability Services Program Operations	HB Section	10.800
	-	

3. PROGRAM LISTING (list programs included in this core funding)

Senior and Disability Services Administration Adult Protective and Community Services Central Registry Unit Long Term Care Ombudsman Program

4. FINANCIAL HISTORY

_	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	25,903,864	24,786,050	25,394,395	25,908,813
Less Reverted (All Funds)	(345,824)	(348,259)	(356,961)	(360,301)
Less Restricted (All Funds)*	0	0	0	(127,087)
Budget Authority (All Funds)	25,558,040	24,437,791	25,037,434	25,421,425
Actual Expenditures (All Funds)	23,630,513	23,413,095	23,066,957	N/A
Unexpended (All Funds)	1,927,527	1,024,696	1,970,477	N/A
Unexpended, by Fund: General Revenue Federal Other	638,564 1,288,963 0	262,594 762,102 0	936,145 1,034,332 0	N/A N/A N/A

Actual Expenditures (All Funds)

25,000,000

23,630,513

23,413,095

23,066,957

20,000,000

15,000,000

FY 2018

FY 2019

FY 2020

*Current Year restricted amount is as of 7/01/2020.

Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

CORE RECONCILIATION DETAIL

DIV SENIOR & DISABILITY SVCS

5. CORE RECONCILIATION DETAIL

	=		077 = 07				0,0000	
	DD	00.0	865,000	930,000		نا ٥	000,295,1	
	33	00.0	917,200,1	1,151,080		0 5	967,831796	
	Sd	92.215	10,269,400	۷۱9٬069٬۱۱		0 ۲۱'	710,036,12	
GOVERNOR'S RECOMMENDED	CORE							
	IstoT	515.26	911,751,21	769,177,£1		°97 0	<u></u>	
		00.0	865,000	000'086		١ 0	000,867,r	
	33	00.0	917,200,1	1,151,080		٥ 5'	5,153,796	
	Sd	92.215	10,269,400	۷۱9٬069٬۱۱		0 ۲۱'	710,036,12	
DEPARTMENT CORE REQUEST								
	IstoT	92.215	911,751,21	769,177,£1		°57 0	25,908,813	
	DD	00.0	865,000	930,000		١ 0	000'96 Հ '	
	33	00.0	1,002,716	1,151,080		٥ 5'	967,531796	
	Sd	92.215	10,269,400	۷۱9٬069٬۱۱		0 ۲۱'	710,096,12	
ZAFP AFTER VETOES								
	Budget Class	3T7	ЯЭ	Federal	Other	ΣŢ	Total Explanation	Explanation

0 25,908,813

769,177,E1 311,TE1,21 32.313

Total

DECISION ITEM SUMMARY

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EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

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00.0	0\$	515.26	\$18,806,52\$	515.26	\$25,908,813	516.24	726,099,327	JATOT UNA 9
00.0	0	92.319	25,908,813	92.215	25,908,813	516.24	726,660,82	J ∆ ТОТ
00.0	0	00.0	000,897,1	00.0	000'96∠'≀	00.0	Z10,077,1	αq - JATOT
00.0	0	00.0	930,000	00.0	000,089	00.0	759,1 <u>26</u>	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	865,000	00.0	900,398	00.0	848,378	PROGRAM-SPECIFIC GENERAL REVENUE
00.0	0	00.0	2,153,796	00.0	2,153,796	00.0	∠ + 0'9∠↓'↓	33 - JATOT
00.0	0	00.0	1,151,080	00.0	1,151,080	00.0	979'079	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	1,002,716	00.0	917,200,1	00.0	232,522	GENEKAL KEVENUE GENERAL REVENUE
00.0	0	92.215	710,096,12	92.215	710,096,12	516.24	20,153,268	S9 - JATOT
00.0	0	28.032	Z19'069'11	250.28	Z19'069'11	277.02	E1E,816,01	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	797'44	10,269,400	86.492	004,692,01	239.22	996'982'6	PERSONAL SERVICES GENERAL REVENUE
								СОКЕ
								DIV SENIOR & DISABILITY SVCS
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	ЭТЯ	DOLLAR	ЭТЭ	DOLLAR	Pun∃

BUDGET

FY 2021

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Budget Object Summary

Decision Item

Budget Unit

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DEPT REQ

EX 2022

DEPT REQ

EX 2022

СОГЛШИ	СОГЛШИ	3T7	ВОГГАВ	3T7	DOLLAR	3T4	DOLLAR	Budget Object Class
								DIV SENIOR & DISABILITY SVCS
50 0		00 0	J	02 PP	00 10 V	50 Cr	330 077	CORE
0.00		00.0	0	97.11	102 36	12.80	£86,014	ADMIN OFFICE SUPPORT ASSISTANT
00.0		00.0	0	1.00	921,529	00.1	277,82	OFFICE SUPPORT ASSISTANT
00.0		00.0	0	29.25	971,E88	66.72	164,877	SR OFFICE SUPPORT ASSISTANT
00.0 0		00.0	0	00.0	0	20.0	8 8	INFORMATION TECHNOLOGIST I
00.0		00.0	0	00.0	0	00.0	893.0	INFORMATION TECHNOLOGIST II
00.0 0		00.0	0	00.0	0	90.0	2,568	INFORMATION TECHNOLOGIST III
00.0 0		00.0	0	00.0	0	46.0 33.0	209 18 699'91	INFORMATION TECHNOLOGY SPECT
00.0 0		00.0	0	00.0	0	8£ 0	182 9C	INFORMATION TECHNOLOGY SPEC II
00.0 0		00.0	0	00.0	062.67	86.0	187,82 187,82	INFORMATION TECHNOLOGY SPEC II
00.0 0		00.0	0	00.1	803,290 49,290	10.1	ታ9 ۲ ,6 <u></u> 4	II TNATNUODDA
0.00 0.00 0.00		00.0	0	00.1	909'29 257 ZV	00.1 00.1	680,23 995 54	ACCOUNTANT III ACCOUNTING SPECIALIST II
		00.0	0	00.1	294,74 284,74		666,74 929	
00.0 0		00.0	0	00.1	£70,82 £70,82	76.0 75.0	672,88 672,88	ACCOUNTING SPECIALIST III
00.0 0		00.0	0	00.1	162,82 778 8£	00.1 00.1	30 402 20,653	ACCOUNTING CLERK
00.0 0		00.0	0	00.1 20.2	778,8E 319.08	00.1 88.1	204,8E 159 77	ACCOUNTING GENERALIST I
00.0 0		00.0	0	2.02	919,08 85 AET	98.1 30.5	159,87 924 A9	RESEARCH ANAL II
00.0 0		00.0	0	3.00	987,461 889 02	2.05	05£ 74 05£ 74	TRAINING TECH II
00.0 0		00.0	0	10.1 00.2	882,02	00 S 96'0	098,74 678 07	TRAINING TECH III EXECLITIVE I
0.00 0.00 0.00		00.0 00.0	0	2.00	898,17 787 SE	2.00 1.00	678,07 676.65	EXECUTIVE I HEALTH PROGRAM REP I
0.00 0		00.0	0	00.1 00.0	787, <u>2</u> £ 0	00.0	79 73†426	HEALTH PROGRAM REP II
0.00		00.0	0	00.1	24,423	14.0	990,71	HEALTH PROGRAM REP III
0.00		00.0	0	00.64	717,728,2	18.84	2,185,706	ADLT PROT & CMTY SUPV
0.00		00.0	0	69.71	980,798	16.04	828,952	LONG-TERM CARE SPEC
00.0		00.0	0	13.00	690'179	12.23	262'395	AGING PROGRAM SPEC II
00.0		00.0	0	20.62	18,854	32.71	962,078	ADLT PROT & CMTY WKR I
0.00		00.0	0	296.56	12,128,484	09.862	10,878,243	ADLT PROT & CMTY WKR II
00.0		00.0	0	00.0	0	00.0	818	FACILITY SURVEYOR II
0.00		00.0	0	10.50	448,284	20.93	991,548	INVESTIGATOR II
0.00		00.0	0	49. 4	986'608	66.4	26,752	INVESTIGATOR III
0.00		00.0	0	2.00	130,226	16.1	125,061	FISCAL & ADMINISTRATIVE MGR B1
0.00		00.0	0	00.00	0	00.1	211, ₇ 8	INVESTIGATION MGR B1

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СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	ETE	DOLLAR	Budget Object Class
								SOVS YTIJIBARILI & YOCS
	Ŭ	30 0	3	30 F	, , , , ,	50 0	Ŭ	CORE
00.0	0	00.0	0	00.1	171,78	00.0	0	INVESTIGATION MGR B2
00.0	0	00.0	0	47.12	701,835,1 701,835,1	66.61	1,283,233	HEALTH & SENIOR SVCS MANAGER 1
00.0	0	00.f	851,801 157 88	00.1	881,801 88138	00.1	790,401 559 88	DEBITE DIVISION DIBECTOR DIVISION DIRECTOR
00.0	0	00.1 00.8	187,88	00.1 00.8	187,88	00.1	229,88	DESIGNATED BRINCIPAL ASST DIV
00.0	0	3.00 90.81	637,733 096,771	3.00 3.06	096,771 627,733	5.89 9.05	12,610 345,610	PROJECT SPECIALIST PROJECT SPECIALIST
00.0	0	17.0	694,74	17.0	694,74	99.0	708,84	TEGAL COUNSEL
00.0	0	01.0	12,085	01.0	12,085	70.0	996,8	CHIEF COUNSEL
00.0	0	01.0	741,8	01.0	741,8	01.0	278,7	SENIOR COUNSEL
	0	00.0	ū	00.0	0	22.1		TYPIST
00.0	0	0.50	0†0'†l	0.50	040,41	86.0	298,8S 267,01	OFFICE WORKER MISCELLANEOUS
00.0	0	00.0	0	00.0	0	00.0	231	DATA PROCESSING MANAGER
00.0	0	00.0	0	00.0	0	10.0	381	MISCELLANEOUS PROFESSIONAL
00.0	0	00.1		00.1	42,508	00.1	42,523	SPECIAL ASST PROFESSIONAL
00.0	0	00.0	0 809'Z /	00.0	0	₽ 0.0	898,1 853,24	SPECIAL ASST OFFICE & CLERICAL
00.0	0	00.1	26,705	00.0	0	00.0	0	TNATSISSA TROPAGNUS NIMDA
00.0	0	97.11	432,183	00.0	0	00.0	0	LEAD ADMIN SUPPORT RSSISTANT
00.0	0	3.00	004,861	00.0	0	00.0	0	SR BUSINESS PROJECT MANAGER
00.0	0	00.1	787,28	00.0	0	00.0	0	PROGRAM ASSISTANT
00.0	0	3.00	142,308	00.0	0	00.0	0	SENIOR PROGRAM SPECIALIST
00.0	0	00.1	72,816	00.0	0	00.0	0	PROGRAM MANAGER
00.0	0	20.2	919'08	00.0	0	00.0	0	ASSOC RESEARCH/DATA ANALYST
00.0	0	00.1	28,933	00.0	0	00.0	0	SENIOR RESERRCH/DATA ANALYST
00.0	0	10.4	440,881	00.0	0	00.0	0	SR STAFF DEV TRAINING SPEC
00.0	0	00.1	78,291	00.0	0	00.0	0	ACCOUNTS ASSISTANT
00.0	0	2.00	898,17	00.0	0	00.0	0	SENIOR ACCOUNTS ASSISTANT
00.0	0	00.1	49,290	00.0	0	00.0	0	ACCOUNTS SUPERVISOR
00.0	0	2.00	84,329	00.0	0	00.0	0	ACCOUNTANT
00.0	0	2.00	188,011	00.0	0	00.0	0	SENIOR ACCOUNTANT
00.0	0	00.1	410,73	00.0	0	00.0	0	ACCOUNTANT SUPERVISOR
00.0	0	00.1	212,87	00.0	0	00.0	0	ACCOUNTANT MANAGER
00.0	0	29.25	971,888	00.0	0	00.0	0	ASSOCIATE SOCIAL SERVICES SPEC

BUDGET

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								СОВЕ
								DIV SENIOR & DISABILITY SVCS
СОГЛШИ	СОГЛШИ	ЭТЯ	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	Budget Object Class
SECURED	SECNKED	рерт кед	DEPT REQ	BUDGET	BUDGET	AUTOA	AUTDA	Decision Item
******	******	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit

00.0	0	00.0	2,153,796	00.0	2,153,796	00.0	₹ 0,8₹1,1	33 - JATOT
00.0	0	00.0	16,200	00.0	16,200	00.0	6,542	WISCELLANEOUS EXPENSES
00.0	0	00.0	3,100	00.0	3,100	00.0	 	EQUIPMENT RENTALS & LEASES
00.0	0	00.0	00١،٦	00.0	00١,٦	0.00	2,074	BUILDING LEASE PAYMENTS
00.0	0	00.0	009'9	0.00	009'9	0.00	0	РРОРЕЯТУ & ІМРВОУЕМЕИТЅ
00.0	0	00.0	ا∠4٬000	0.00	ا∠4٬000	0.00	778,41	OTHER EQUIPMENT
00.0	0	00.0	22,800	0.00	22,800	0.00	113,511	OFFICE EQUIPMENT
00.0	0	00.0	12,000	00.0	12,000	00.0	192	M&R SERVICES
00.0	0	00.0	244,000	0.00	244,000	0.00	200,843	PROFESSIONAL SERVICES
00.0	0	00.0	297,000	0.00	297,000	0.00	∠†l'69l	COMMUNICATION SERV & SUPP
00.0	0	00.0	62,200	00.0	62,200	0.00	981,61	PROFESSIONAL DEVELOPMENT
00.0	0	00.0	246,26	00.0	92,942	0.00	40,735	SUPPLIES
00.0	0	00.0	31,858	00.0	31,858	0.00	۲0۱,3۱	TRAVEL, OUT-OF-STATE
00.0	0	00.0	960'†81'1	00.0	960'†81'1	0.00	702,123	TRAVEL, IN-STATE
00.0	0	515.26	710,036,12	515.26	710,036,12	516.24	20,153,268	89 - JATOT
00.0	0	00.1	24,423	00.0	0	00.0	0	SR EMERGENCY MANAGEMENT OFCR
00.0	0	١.00	121,78	00.0	0	0.00	0	INVESTIGATIONS MANAGER
00.0	0	49.4	309,936	00.0	0	00.0	0	NON-COMMSSN INVESTIGATOR SPV
00.0	0	10.50	448,284	00.0	0	0.00	0	SR NON-COMMISSION INVESTIGATOR
00.0	0	2.00	133,400	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM SPV
00.0	0	3.00	122,526	00.0	0	00.0	0	SR PUBLIC HEALTH PROGRAM SPEC
00.0	0	3.00	232,700	00.0	0	0.00	0	SOCIAL SERVICES ADMINISTRATOR
00.0	0	12.74	720,658	00.0	0	0.00	0	SOCIAL SVCS AREA SUPERVISOR
00.0	0	90.05	101,285,2	00.0	0	0.00	0	SOCIAL SVCS UNIT SUPERVISOR
00.0	0	9.00	140,722	00.0	0	0.00	0	SR SOCIAL SERVICES SPECIALIST
00.0	0	334.87	£7E,418,E1	00.0	0	00.0	0	SOCIAL SERVICES SPECIALIST
								באר

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00.0 00.0 00.0		764.44 28.032 0.00	911,751,21 \$ 768,177,51 \$ 0\$	86.482 85.032 0.00	911,751,21 \$ 768,177,51 \$ 0\$	22.652 20.772 00.0	338,029,01\$ 274,874,21\$ 0\$	GENERAL REVENUE FEDERAL FUNDS SOTHER FUNDS
00.0	0\$	515.26	\$18'806'97\$	515.26	\$25,908,813	516.24	428 ,660,8 2 \$	DATOT GRAND
00.0	0	00.0	۱,۲96,000	00.0	000'96∠'ا	00.0	210,077,1	Q9 - JATOT
00.0	0	00.0	000'962'\	00.0	000,897,r	00.0	210,077,1	SNOITUBIATZIO MAAƏOA9
								СОКЕ
								DIV SENIOR & DISABILITY SVCS
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	Budget Object Class
SECURED	SECURED	DEPT REQ	DEPT REQ	BUDGET	BUDGET	AUTDA	AUTDA	Decision Item
*******	*****	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit

Department of Health and Senior Services **HB Section(s):** 10.755, 10.800 **Senior and Disability Services Administration** Program is found in the following core budget(s): **DSDS Program** Office of Emergency **Operations** Coordination **TOTAL** 0 2,241,864 GR 2,241,864 2.463.622 58,412 **FEDERAL** 2.522.034 **OTHER** 0 0

1a. What strategic priority does this program address?

4,705,486

Foster a sustainable, high-performing department.

1b. What does this program do?

TOTAL

• The Division of Senior and Disability Services (DSDS) is the designated state unit on aging with primary responsibility to plan, coordinate, improve, and administer programs for Missouri's seniors and adults with disabilities age 18 to 59 in need of protection or long-term care services.

58,412

- The division's activities include investigating hotline calls that allege Abuse, Neglect, or Financial Exploitation of seniors and adults with disabilities; administering the Medicaid Home and Community Based Services Program; providing education and information about home and community based options for long-term care; administering the State Long-Term Care Ombudsman Program; monitoring Area Agencies on Aging programs for compliance with the Older Americans Act; and providing customer service, information, and referral services to seniors and adults with disabilities.
- DSDS' Director's Office provides management, oversight, and direction for division programs designed to help ensure the needs of Missouri senior citizens and adults with disabilities are addressed; reviews legislation impacting seniors and adults with disabilities; ensures compliance with federal and state rules and regulations; develops the division budget and tracks expenditures; coordinates policy responses to ensure consistency with division/department policy; coordinates disaster planning and emergency response; responds to clients, constituents, and legislative inquiries; and administers a workforce of approximately 500 employees.
- DSDS is developing a multifaceted approach on retention to help the division and its employees by creating a flexible work, environment with telecommuting, flexible work hours, remote work spaces, cross training, and the creation of the new Office of Organizational, Advancement, which will facilitate employee led process improvement initiatives.
- In FY 2020, DSDS launched telecommuting as an alternative for most staff across the state in an effort to increase employee retention and maintain a
 coordinated continuity of operations across the state.

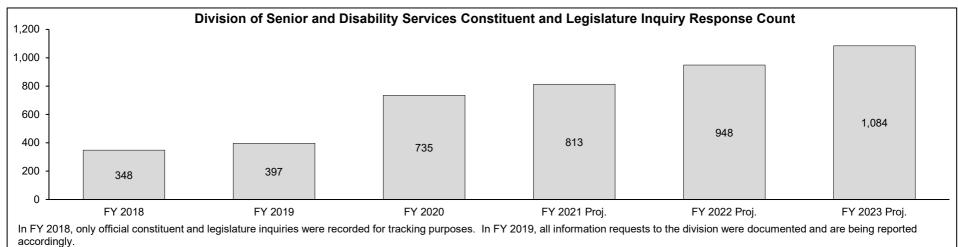
4,763,898

Department of Health and Senior Services	HB Section(s): 10.755, 10.800
Senior and Disability Services Administration	
Program is found in the following core budget(s):	

2a. Provide an activity measure(s) for the program.

Services Provided by the Division's Administration in Support of Programmatic Functions						
Payment Documents	6,057					
Purchase Orders and Modifications	2,093					
Contracts and Amendments	61					
Fiscal Note Responses	181					
Continuity of Operations Training and Presentation Participants	153					
Multi Agency Resource Centers (MARCS) DSDS staff participated in Response to Disasters	4					
DSDS Staff Development Training Attendees	330					
DSDS Constituent Inquiries	495					
DSDS Legislative Inquiries/Requests	240					
Presentations/Exhibiting Events	81					
People Reached by Events	8,613					
Emergency Preparedness Training Participants	695					
CPR Training and Presentation Participants	197					

2b. Provide a measure(s) of the program's quality.



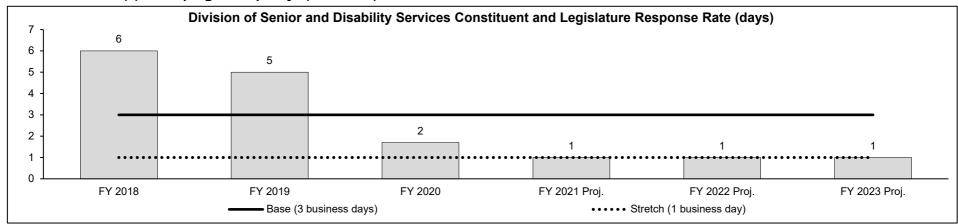
Department of Health and Senior Services

Senior and Disability Services Administration

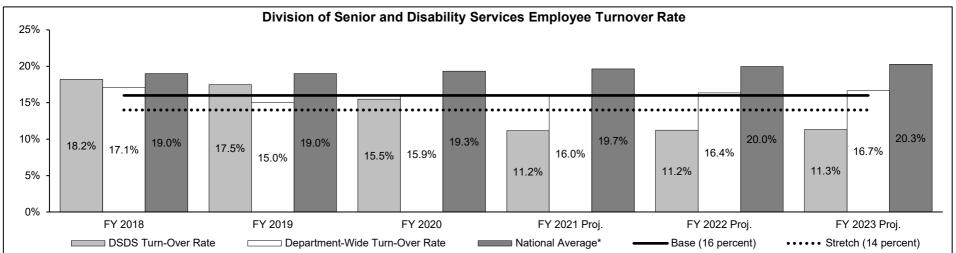
HB Section(s): 10.755, 10.800

Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality. (continued)



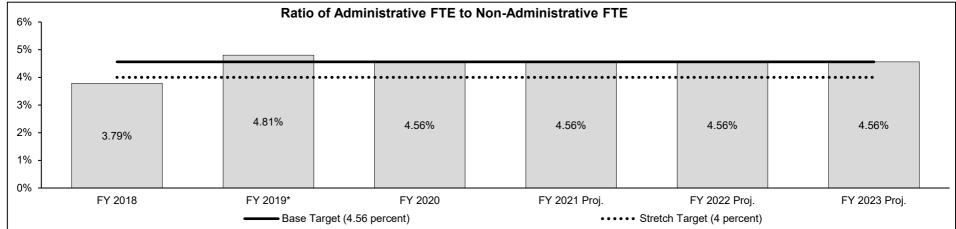
2c. Provide a measure(s) of the program's impact.



*National Average data is from Bureau of Labor and Statistics and reflects the yearly average for State and Local Governments (excluding education). FY 2020 to FY 2023 the national average is a projected trend. US Department of Labor, Bureau of Labor Statistics. https://www.bls.gov/news.release/jolts.t16.htm (Last updated March 17, 2020.)

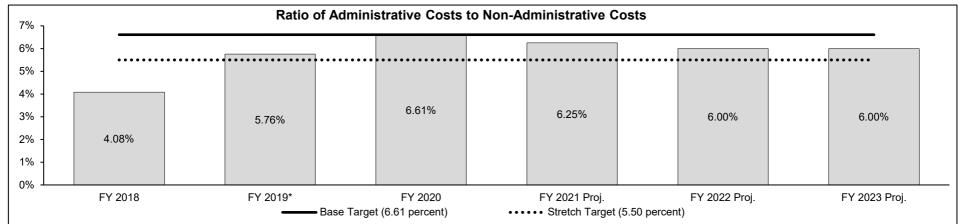
Department of Health and Senior Services	HB Section(s): 10.755, 10.800
Senior and Disability Services Administration	
Program is found in the following core budget(s):	

2d. Provide a measure(s) of the program's efficiency.



Administrative FTE include staff from the Director's Office and the Financial Support staff of DSDS. These figures do not include FTE performing programmatic activities.

*A reorganization to facilitate a more specialized response to needs of vulnerable populations added five additional Administrative positions to this employee count.

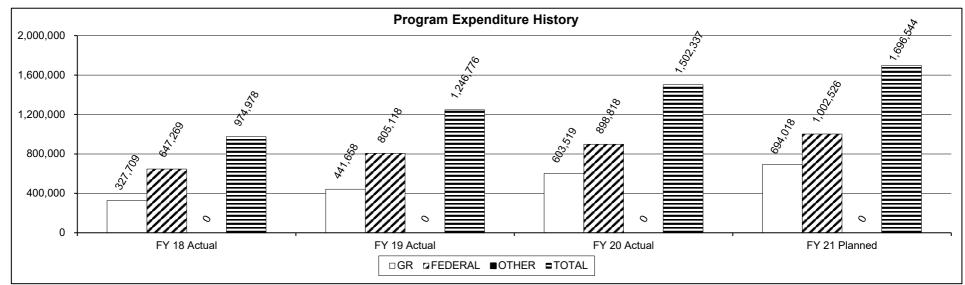


Administrative Costs include personal services (PS) and expense & equipment (EE) from the Director's Office and the Financial Support staff of DSDS. These figures do not include costs in support of programmatic activities.

^{*}A reorganization to facilitate a more specialized response to needs of vulnerable populations added five additional Administrative positions to this employee count.

Department of Health and Senior Services	HB Section(s): 10.755, 10.800
Senior and Disability Services Administration	<u></u>
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Not applicable.

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Chapters 192 and 208, RSMo. Federal authority for specific activities is included on division program description pages.

6. Are there federal matching requirements? If yes, please explain.

Federal matching requirements for various activities are included on respective division program description pages.

7. Is this a federally mandated program? If yes, please explain.

The federal mandate for various activities is included on respective division program description pages.

Department of Health and Senior Services				HB Section(s): 10.800		
Adult Protective and Community Services - Field Operations						
Program is foun	d in the following core bud	lget(s):				
	DSDS Program Operations					TOTAL
GR	9,297,741					9,297,741
FEDERAL	10,347,645					10,347,645
OTHER	0					0
TOTAL	19,645,386					19,645,386

1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need.

1b. What does this program do?

Adult Protective and Community Services (APCS) field staff:

- Investigate allegations of abuse, neglect, and financial exploitation (A/N/E) of individuals over age 60 and those with disabilities who are age 18 to 59;
- Coordinate appropriate intervention services to allow those individuals to remain in the least restrictive environment and prevent future incidents;
- Process new requests for Medicaid Home and Community-Based Services (HCBS), including prescreens and assessments to determine level of care;
- · Develop and authorize Home and Community-Based Services;
- · Conduct annual reassessments of HCBS; and
- Process changes to care plans for HCBS participants, allowing them to remain in the least restrictive environment of their choice including their homes and communities rather than entering a nursing facility.

Staff located in the Bureau of Home and Community Services, Bureau of Long Term Services and Supports and the Bureau of Adult Protective Services (APS):

- · Interpret state and federal laws, rules, and regulations;
- Ensure the Division of Senior and Disability Services (DSDS) complies with the Medicaid State Plan and applicable Medicaid Waivers administered by the division;
- Set policies that apply to APS and HCBS programs; and
- Provide training to HCBS providers and DSDS staff.

The Special Investigations Unit assists in complex and/or criminal investigations of alleged abuse, neglect, or financial exploitation for seniors and disabled adults between the ages of 18 to 59, while simultaneously acting as a liaison between DSDS staff, local law enforcement, local prosecuting attorneys, and the Missouri Attorney General's Office.

Department of Health and Senior Services

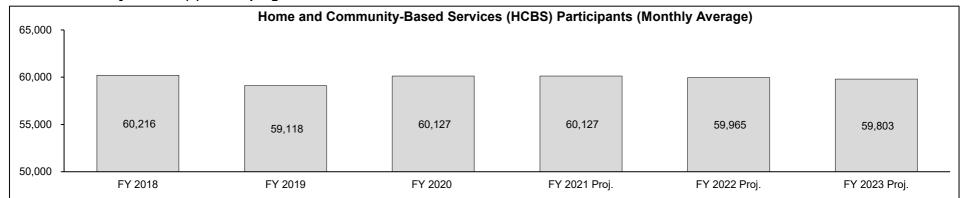
Adult Protective and Community Services - Field Operations

Program is found in the following core budget(s):

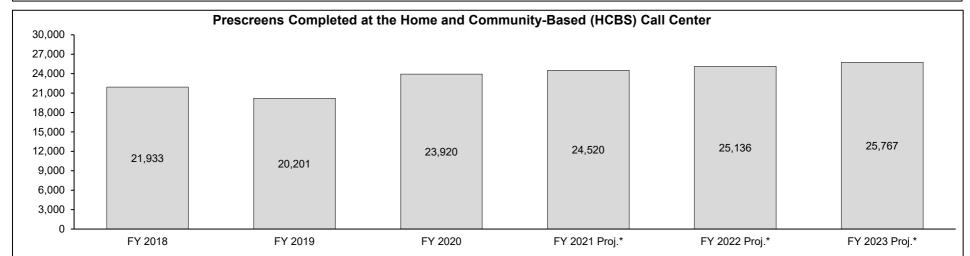
HB Section(s): 10.800

HB Section(s): 10.800

2a. Provide an activity measure(s) for the program.



The program participation decrease from FY 2018 to FY 2019 was a result of legislation wherein the Level of Care (LOC) score requirement for admission to a Skilled Nursing Facility or HCBS was raised from 21 to 24.



^{*}The HCBS Prescreen is an eligibility tool designed to assess preliminary eligibility for HCBS. HCBS applicants who meet preliminary requirements at the Prescreen are referred to DSDS staff for a comprehensive LOC assessment.

FY 2020: Prescreen no longer includes preliminary LOC assessment. Prescreen consists of confirming Medicaid eligibility prior to referring for comprehensive assessment.

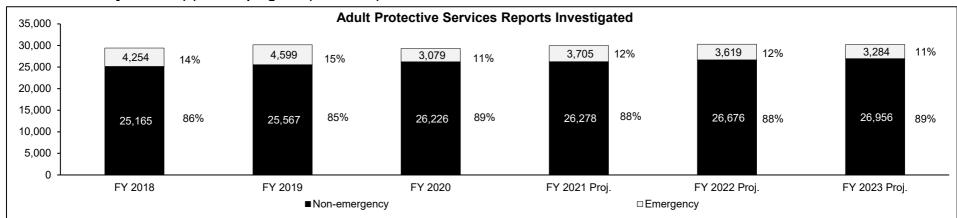
HB Section(s): 10.800

Department of Health and Senior Services

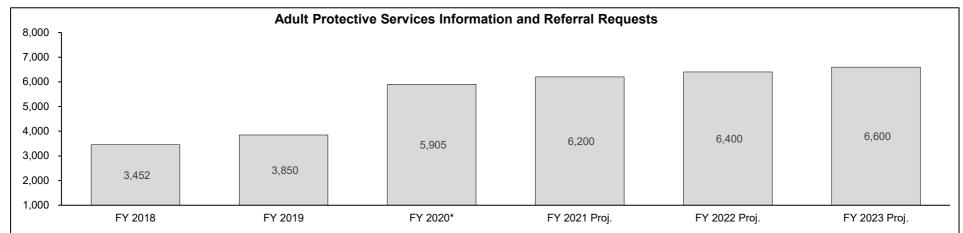
Adult Protective and Community Services - Field Operations

Program is found in the following core budget(s):

2a. Provide an activity measure(s) for the program. (continued)



Emergency reports require the adult to be in imminent risk or be experiencing danger to his or her health, safety, or welfare as well as a substantial probability that death or serious injury will result. Examples include such issues as severe physical abuse, sexual abuse, or caregiver neglect.

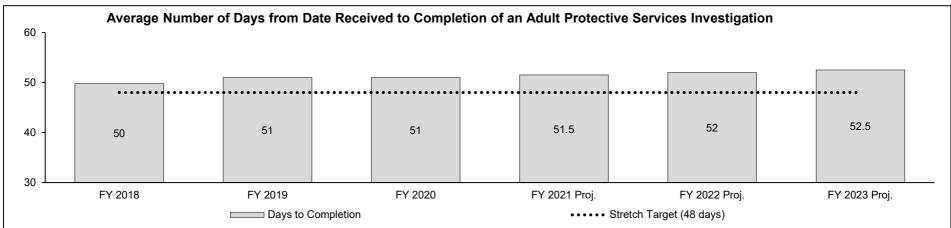


Information and Referral Request activities address individual situations that do not rise to the level of an Adult Protective Services Report or are related to additional information received on Adult Protective Services Reports. Activities may include phone calls, home visits, and referrals to local community resources or other state agencies.

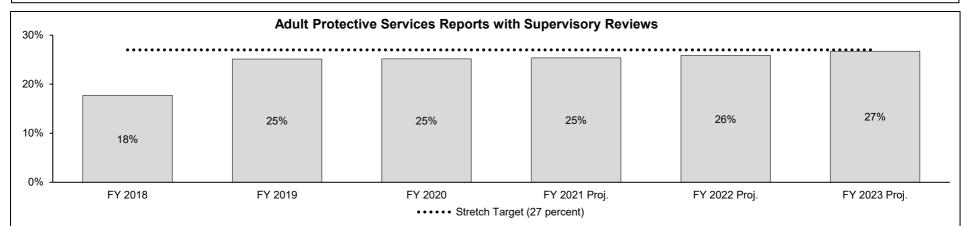
*Process improvement initiatives were put into place during FY 2020 to more appropriately classify requests.

Department of Health and Senior Services	HB Section(s): 10.800
Adult Protective and Community Services - Field Operations	
Program is found in the following core budget(s):	

2b. Provide a measure(s) of the program's quality.



The national average for investigation completion is 52.6 days; data provided by the National Adult Maltreatment Reporting System (NAMRS) FFY 2019. Common actions taken during an investigation include; Interviews, information gathering, providing appropriate interventions, and making referrals to appropriate law enforcement agencies.



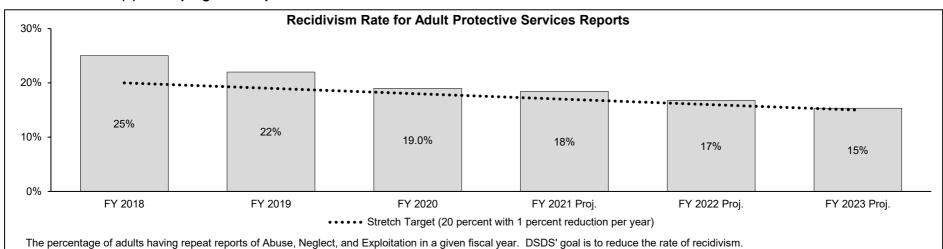
DSDS reviews investigations to assure that the case is complete, prompt, and thorough, as well as the appropriate interventions applied to the situation. In FY 2019, DSDS determined that the Special Investigations Unit (SIU) would investigate all criminal allegations which significantly increased the number of reports received by this unit. SIU required all cases to be reviewed prior to close which, in turn, significantly increased the number of reviews for FY 2019 and FY 2020.

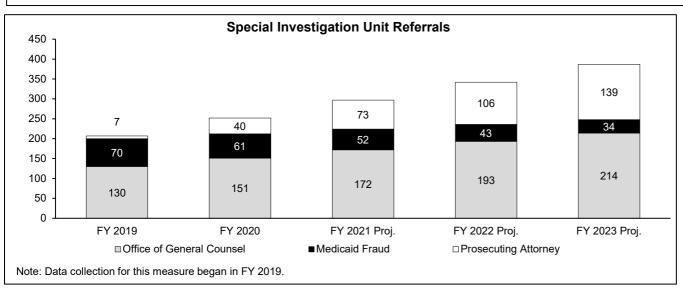
Department of Health and Senior Services

Adult Protective and Community Services - Field Operations

Program is found in the following core budget(s):

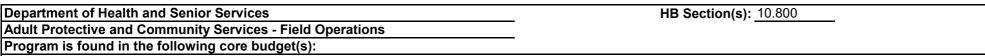
2c. Provide a measure(s) of the program's impact.



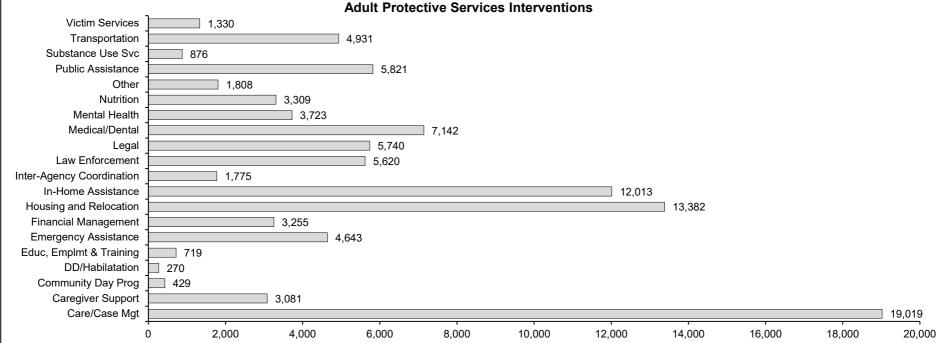


The Special Investigation Unit refers substantiated allegations involving criminal conduct such as fraud, financial exploitation or theft, and physical and sexual abuse to the appropriate state agency or prosecuting attorney. Referrals to the department's Office of General Counsel are to place persons on the Employee Disqualification List after due process. Anyone placed on this list cannot work for an HCBS provider for a specified period.

HB Section(s): 10.800



2c. Provide a measure(s) of the program's impact. (continued)



When responding to an Adult Protective Services Report, staff use interventions to address an adult's unmet needs or reduce the risk of Abuse, Neglect, or Exploitation. The categories above were developed to provide information to the National Adult Maltreatment Reporting System (NAMRS), the national data collection system for Adult Protective Services. In FY 2020, Adult Protective Services staff used nearly 99,000 interventions during the investigation of Abuse, Neglect, or Exploitation of vulnerable adults in Missouri.

Additional descriptions of category titles:

Care/Case Mgt: Involves the development and implementation of a service plan to mobilize the formal and informal resources and services identified in the assessment to meet the needs of the eligible adult.

DD/Habilitation: Provided for adults with developmental disabilities, physical disabilities and/or visual and auditory impairments to maximize potential, alleviate the effects of the disability, and enable them to live in the least restrictive environment possible.

Financial Management: Services or activities to assist in managing finances or planning for future financial needs, such as bank record reviews, wills, and budgeting.

Law Enforcement: Any services provided by law enforcement such, as crisis intervention, police reports, or driver's condition reports.

Public Assistance: Services and activities provided to obtain assistance for individuals who lack the resources to provide basic necessities for themselves and their families such as SNAP, Medicaid/Medicare, or financial aid programs.

Victim Services: Services and activities provided to, or on behalf of, victims at any stage of the criminal justice process. Programs supporting victims of domestic violence, sexual assault, abuse of older women, violence against women, and general crimes which are being handled by the police or prosecutors' offices.

Department of Health and Senior Services

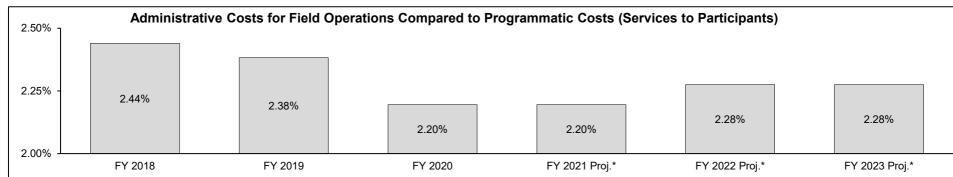
Adult Protective and Community Services - Field Operations

Program is found in the following core budget(s):

HB Section(s): 10.800

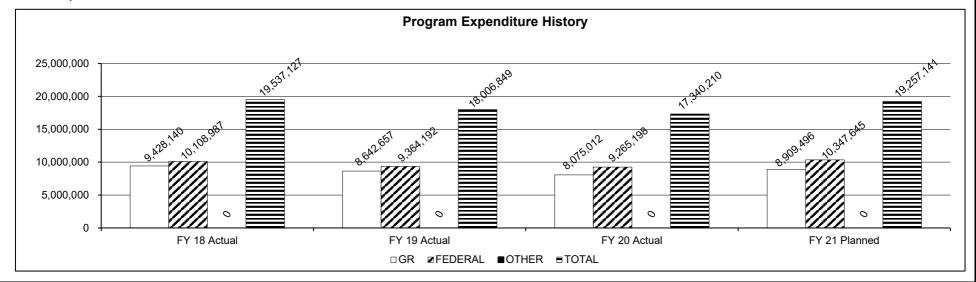
HB Section(s): 10.800

2d. Provide a measure(s) of the program's efficiency.



*The administrative costs are expected to remain lower than FY 2018 and FY 2019 as additional staff efficiencies are implemented, including Home and Community-Based Services mobile assessments, Lean Six Sigma efficiency projects, and Operational Excellence initiatives in the HCBS Call Center and Adult Abuse, Neglect and Financial Exploitation Hotline. The projected increase in FY 2022 and FY 2023 is reflective of the anticipated lift of hiring and spending restrictions post COVID-19.

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



Department of Health and Senior Services	HB Section(s): 10.800
Adult Protective and Community Services - Field Operations	
Program is found in the following core budget(s):	

4. What are the sources of the "Other" funds?

Not applicable.

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Title XIX and Title XX of the Social Security Act; PL 89-73 Older Americans Act, updated in 2006 by PL 109-365; and Chapter 192, Sections 208.152, 208.895, 208.900 to 208.930, 565.180 to 565.188 and 570.145, RSMo.

6. Are there federal matching requirements? If yes, please explain.

Yes, within this program lies responsibility for program oversight of the Medicaid State Plan Personal Care and Adult Day Care Programs, the Aged and Disabled Waiver, and the Independent Living Waiver. State funds receive a 50 percent federal match when activities deal with home and community based care or the health and safety of Medicaid participants.

7. Is this a federally mandated program? If yes, please explain.

No. Due to Missouri opting to offer HCBS, oversight of federal funding is required for use of Title XIX and Title XX of the Social Security Act funds and PL 89-73, Older Americans Act. Additional oversight of the Medicaid HCBS waivers is required by the Centers for Medicare and Medicaid.

Department of Health and Senior Services Central Registry Unit		HB Section(s): 10.800			
		-			
Program is found	d in the following core budg	jet(s):			
	DSDS Program Operations				TOTAL
GR	469,662				469,662
FEDERAL	424,535				424,535
OTHER	0				0
TOTAL	894.197				894.197

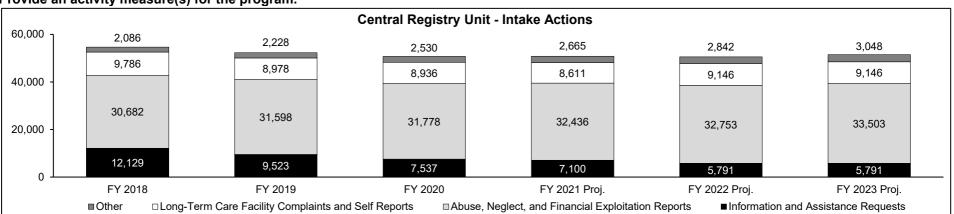
1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need

1b. What does this program do?

- The Central Registry Unit (CRU) serves as the Adult Abuse and Neglect Hotline for the Division of Senior and Disability Services and the Division of Regulation and Licensure. The hotline operates 365 days per year from 7 a.m. to 12 a.m. as well as an Online Reporting option that is available 24 hours a day.
- CRU is the point of entry for registering allegations of abuse, neglect, or exploitation of Missouri's elderly and adults with disabilities, and for regulatory violations of nursing and residential care facilities, home health agencies, hospice agencies, and hospitals.
- CRU also processes reports that are referred to other entities such as the Department of Mental Health, the Department of Social Services Missouri Medicaid Audit and Compliance Unit, and the Veterans Administration for intervention or review.
- · CRU serves as the information and registration entry point for the Shared Care Program and tax credit.

2a. Provide an activity measure(s) for the program.



Other: Shared Care Requests and/or complaints received for other state agencies like Health Services Regulation or Bureau of Special Health Care Needs. In FY 2020, intake actions were reduced due to COVID-19 as fewer reports were made by mandated reporters who regularly interacted with potential victims.

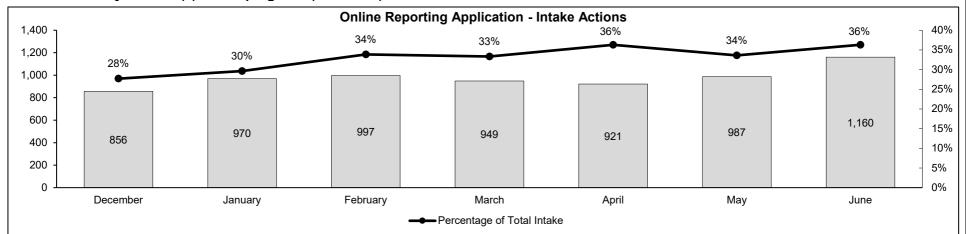
Department of Health and Senior Services

Central Registry Unit

HB Section(s): 10.800

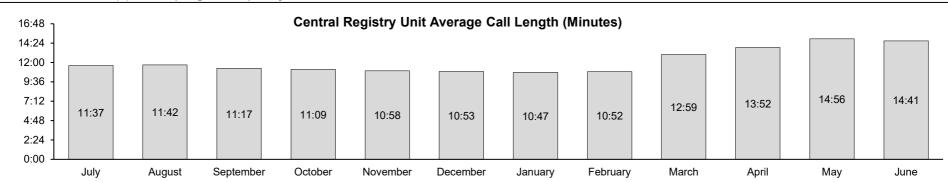
Program is found in the following core budget(s):

2a. Provide an activity measure(s) for the program. (continued)



In November 2019, the Division of Senior and Disability Services implemented an Online Reporting Application for receipt of reports of abuse, neglect, and exploitation in part to reduce the call volume to its call center, the Central Registry Unit (CRU). Since implementation, an average of 33 percent of CRU's intake actions are received via the online application. CRU staff are required to data enter the information from the online portal into the computerized intake system. NOTE: Not all submissions to the application result in a report. Data collection is shown as of the first full month of the application.

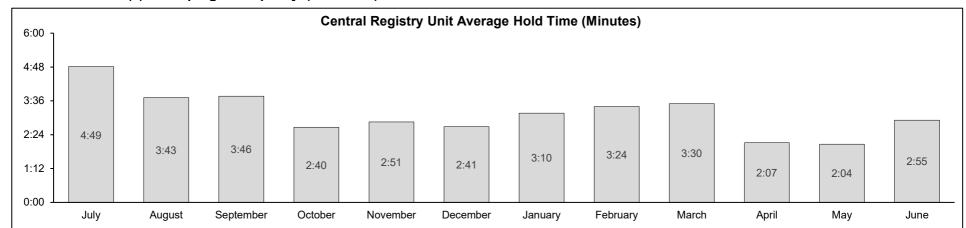
2b. Provide a measure(s) of the program's quality.



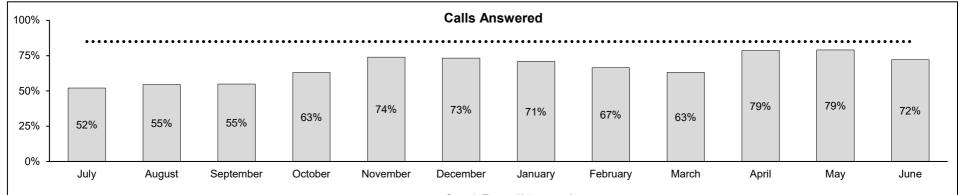
Average call length is the average amount of time each phone call takes for the Central Registry Unit team, from the time the call is answered, to the time the call is terminated including gathering all needed details for reports through the Adult Abuse and Neglect hotline. Because more mandated reporters are using the online reporting application, more public callers, unfamiliar with the process of making a report, are calling resulting in longer call lengths. Central Registry Unit also changed call processes to incorporate time for paperwork. This is a new measure for FY 2020.

Department of Health and Senior Services	HB Section(s): 10.800
Central Registry Unit	
Program is found in the following core hudget(s):	

2b. Provide a measure(s) of the program's quality. (continued)



Central Registry Unit has 18 incoming agent lines. If all the agent lines are busy, the next incoming call goes into a hold queue which holds up to four callers. The average hold time represents the amount of time the caller is in the hold queue before the call is answered by an agent. This is a new measure for FY 2020.



••••• Stretch Target (85 percent)

The percentage of calls answered has shown an overall increase due to a series of process improvements which include the implementation Online Reporting Application in November 2019, changes to the call prompt system, as well as streamlining intake techniques. Additionally, when contacting the hotline, callers are encouraged through the menu system to use the online reporting option when possible. As a result, some calls are abandoned before answer. For this reason, Central Registry Unit's goal is to answer 85 percent of incoming calls. Note: In February and March, CRU experienced a staff shortage causing the percentage to decrease. This is a new measure for FY 2020.

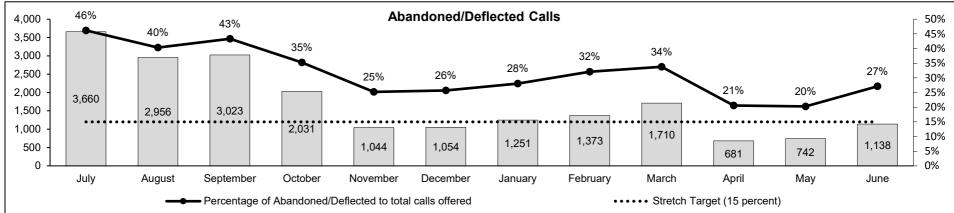
Department of Health and Senior Services

HB Section(s): 10.800

Central Registry Unit

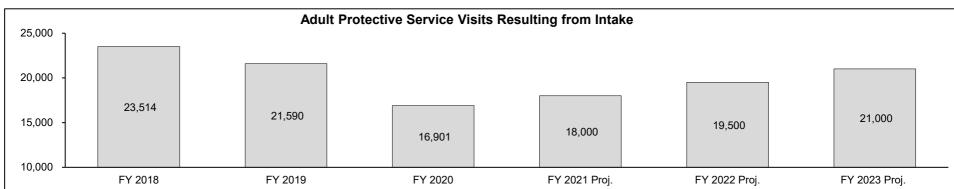
Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality. (continued)



The number of abandoned/deflected calls have shown an overall decrease due to a series of process improvements. Abandoned calls occur when the caller hangs up or disconnects after 5 seconds in the call queue, and deflected calls occur during CRU's business hours when callers are unable to be placed in queue. CRU's goal is to continue process improvements and reduce abandoned/deflected calls to less than 15 percent of calls. Note: In March, the call menu was down resulting in an increase in calls to the queue. This is a new measure for FY 2020.

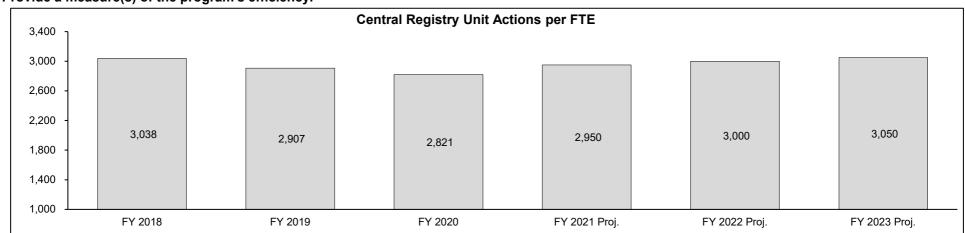
2c. Provide a measure(s) of the program's impact.



As a result of the intake of Abuse, Neglect, and Exploitation reports, Adult Protective Services staff make home visits based upon the allegations and/or information received. Not all reports received by DSDS require a home visit to resolve or remediate issues and some adults cannot be located. Reports not requiring a visit still require investigation. Note: Due to COVID-19, the number of home visits in FY 2020 was significantly reduced due to reduce visits to the vulnerable population served by Adult Protective Services and a decline in the number of reports received.

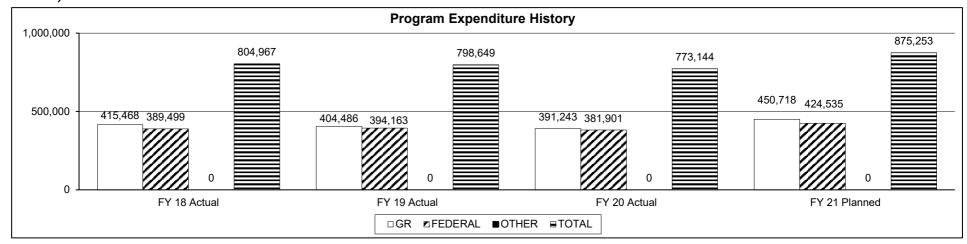
Department of Health and Senior Services	HB Section(s): 10.800
Central Registry Unit	
Program is found in the following core budget(s):	

2d. Provide a measure(s) of the program's efficiency.



The number of actions completed per staff member per fiscal year. Actions include Shared Care Requests/Other Complaints; Long-Term Care Facility Complaints/Self Reports; Abuse, Neglect, and Financial Exploitation Reports; and Information and Assistance Requests. In FY 2020, there was a reduction in actions due to COVID-19. The reduction in actions allowed staff members to increase the percentage of calls answered and reduce abandoned/deflected calls.

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



)(epartment of Health and Senior Services	HB Section(s): 10.800
)(entral Registry Unit	_
1	ogram is found in the following core budget(s):	
١.	What are the sources of the "Other " funds?	
	Not applicable.	
j.	What is the authorization for this program, i.e., federal or state statute, etc.?	(Include the federal program number, if applicable.)
	Chapter 192, Sections 198.032, 198.070, 565.180-565.188, and 570.145, RSMo.	Title XIX of the Social Security Act; PL 89-73, Older Americans Act.
.	Are there federal matching requirements? If yes, please explain.	
	Some of the activities of the Central Registry Unit are eligible for Medicaid funding;	the matching requirement is 50 percent.
.	Is this a federally mandated program? If yes, please explain.	
	No	

Department of Health and Senior Services

Long Term Care Ombudsman Program

HB Section(s): 10.800, 10.825, 10.900

Program is found in the following core budget(s):

	DSDS Program Operations	DSDS Ombudsman Program	DRL Program Operations	TOTAL
GR	0	150,000	0	150,000
FEDERAL	224,099	0	0	224,099
OTHER	0	0	41,500	41,500
TOTAL	224,099	150,000	41,500	415,599

1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need.

1b. What does this program do?

- The Missouri State Long Term Care Ombudsman Program (LTCOP) is federally mandated by the Older American's Act. DHSS is the operating entity in Missouri for this program.
- LTCOP advocates for the rights of over 55,000 residents residing in approximately 1,180 licensed long-term care facilities across the state. Ombudsmen advocate by conducting visits to the facilities on a regular basis.
- LTCOP relies heavily on volunteers to sustain the program, and has ongoing efforts to recruit ombudsman volunteers state-wide to resolve complaints, such as resident rights and quality of care.
- LTCOP maintains a toll-free number for residents and family members to access ombudsman services.
- LTCOP provides educational materials to the public through publications, community events, and presentations on many topics involving LTC residents (i.e. resident rights, choosing a nursing home, preventing abuse and neglect, starting a resident or family council, etc.)
- Missouri's LTCOP program is a decentralized structure, which includes three and a half federally funded state employees, including the State Long Term Care Ombudsman (SLTCO); 15.5 regional ombudsman, either contracted or employed by the Area Agencies on Aging (AAA); and approximately 160 ombudsman volunteers across the state. The regional ombudsman are provided programmatic oversight by the SLTCO.
- State, regional, and volunteer ombudsmen are required to receive 28 hours of training to be certified and designated per the Ombudsman Federal Rule.

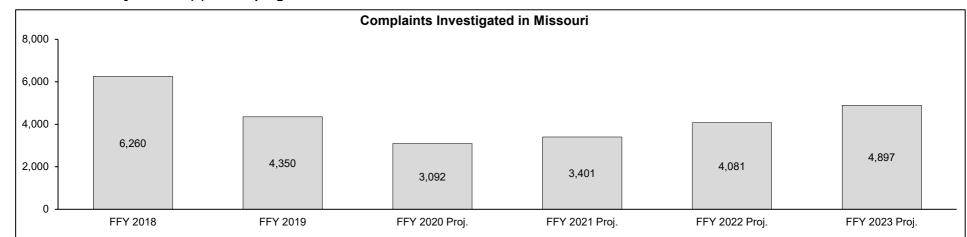
Department of Health and Senior Services

Long Term Care Ombudsman Program

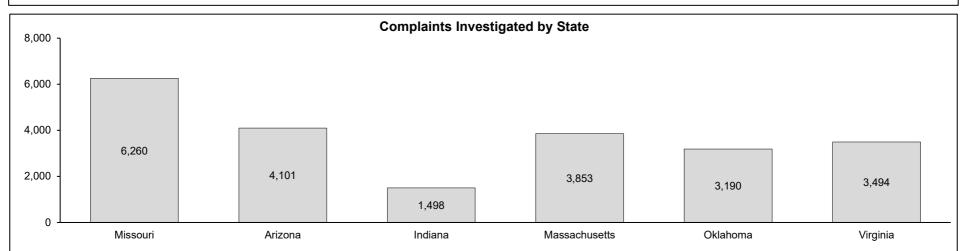
Program is found in the following core budget(s):

HB Section(s): 10.800, 10.825, 10.900

2a. Provide an activity measure(s) for the program.



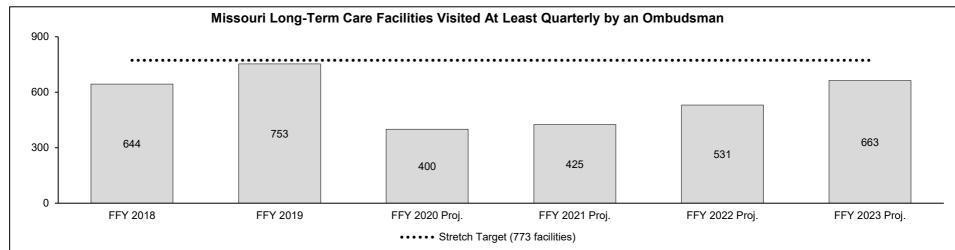
The number of complaints for the last 10 years was used to calculate the projections. The number of complaints fluctuates some year to year depending on how comfortable residents are with voicing complaints. Complaints are projected to decrease for FFY 2020 due to COVID-19 visiting restrictions for half of the reporting period.



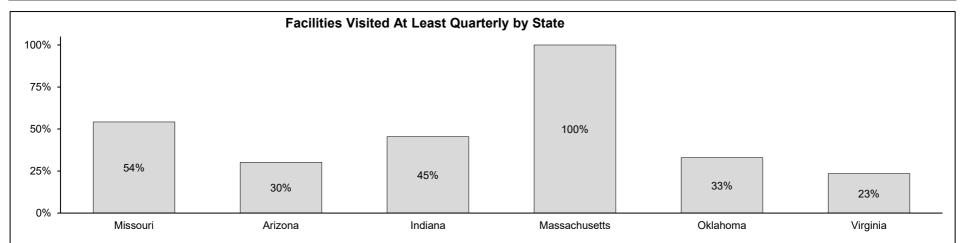
Federal Fiscal Year 2018 is the most current data available from the Administration for Community Living (ACL). These states were selected as they are decentralized like Missouri and similar in population. Decentralized is defined as the State Long Term Care Ombudsman (SLTCO) being an employee of the state, but regional ombudsman are employed by the AAAs and provided programmatic oversight by the SLTCO.

Department of Health and Senior Services	HB Section(s): 10.800, 10.825, 10.900
Long Term Care Ombudsman Program	
Program is found in the following core hudget(s):	

2b. Provide a measure(s) of the program's quality.



Ombudsman are encouraged to visit facilities on a regular basis. The minimum is twice a year per facility according to the Missouri Long-Term Care Ombudsman Policy and Procedure Manual. Due to COVID-19, ombudsman have not been allowed to visit facilities in person since March 13, 2020 making projections for FFY 2020 to FFY 2021 much lower.



FFY 2018 is the most current data available from the Administration for Community Living (ACL). These states were selected as they are decentralized like Missouri and similar in population. Missouri ombudsman are encouraged to visit facilities on a regular basis, with a minimum of two visits per year.

Department of Health and Senior Services

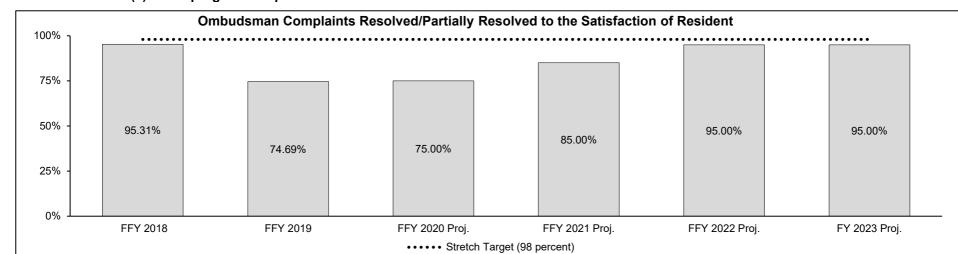
Long Term Care Ombudsman Program

Program is found in the following core budget(s):

HB Section(s): 10.800, 10.825, 10.900

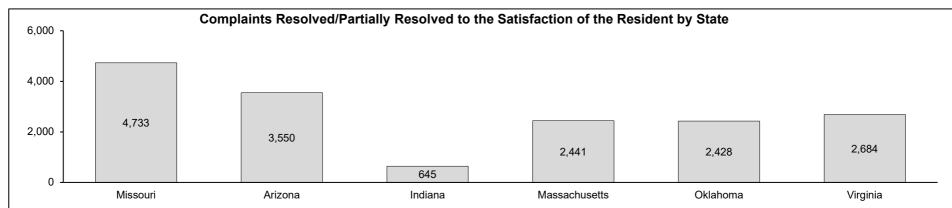
HB Section(s): 10.800, 10.825, 10.900

2c. Provide a measure(s) of the program's impact.



Remaining complaints were either withdrawn, no action needed, referred to other agencies, or not resolved to the resident's satisfaction.

In some cases, resident expectation may differ from what the Ombudsman has the ability to resolve, resulting in less resident satisfaction. FFY 2019 had less complaints than FFY 2018 impacting the percentage resolved. Projections for FY 2020 and 2021 remain lower due to COVID-19, preventing ombudsman from meeting with residents and families in person, making resolution more difficult in some cases.



FFY 2018 is the most current data available from the Administration for Community Living (ACL). These states were selected as they are decentralized like Missouri and similar in population.

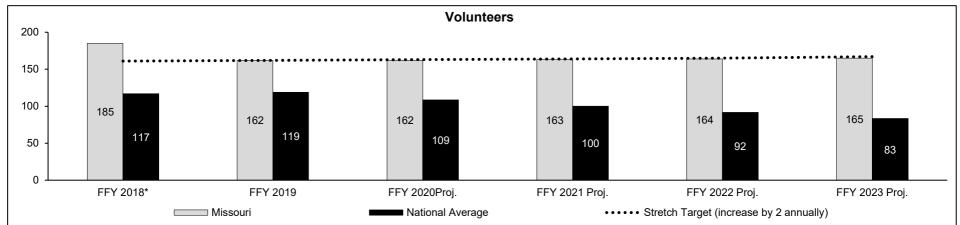
Department of Health and Senior Services

Long Term Care Ombudsman Program

HB Section(s): 10.800, 10.825, 10.900

Program is found in the following core budget(s):

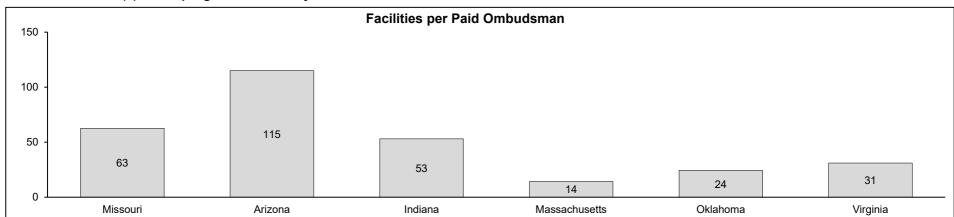
2c. Provide a measure(s) of the program's impact. (continued)



*The national average for FFY 2019 is not yet available from the Administration for Community Living (ACL); therefore, a projection has been provided.

FFY 2018 national data is provided by the ACL. The number of volunteers is decreasing in Missouri and nationally due to volunteers aging out of the program and COVID-19. Projections for FFY 2020 remain at 162 because 29 additional volunteers were in the process of being certified at the end of the FFY 2019 reporting period.

2d. Provide a measure(s) of the program's efficiency.



FFY 2018 is the most current data available from the Administration for Community Living (ACL). These states were selected as they are decentralized like Missouri and similar in population. The paid staff number also includes state office staff who do not make routine nursing home visits in Missouri.

Department of Health and Senior Services

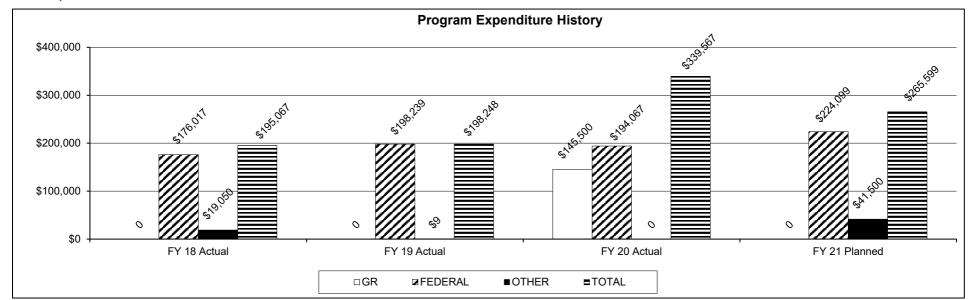
Long Term Care Ombudsman Program

Program is found in the following core budget(s):

HB Section(s): 10.800, 10.825, 10.900

HB Section(s): 10.800, 10.825, 10.900

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Nursing Facility Quality of Care (0271).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

PL 89-73 Older Americans Act, updated by PL 109-365; 42 U.S.C., Section 3058; and 192.2300 through 192.2315, RSMo.

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

Yes, states receiving Older Americans Act funding are mandated to have a long-term care ombudsman serving residents statewide.

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58845C
Senior and Disability Services		
Core - Adult Protective Services and NME Programs	HB Section	10.805

CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 202	2 Governor's	Recommendat	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	70,000	85,000	0	155,000	EE	0	0	0	0
PSD	635,065	82,028	0	717,093	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	705,065	167,028	0	872,093	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes bu	idgeted in House	Bill 5 except for	r certain fringes	budgeted	Note: Fringes	budgeted in Hous	e Bill 5 except	for certain fring	es budgeted
					" "	AT			

directly to MoDOT, Highway Patrol, and Conservation.

directly to MoDOT, Highway Patrol, and Conservation.

2. CORE DESCRIPTION

This core funding provides temporary protective services for eligible adults who have been victims of abuse, neglect, or financial exploitation. The Division of Senior and Disability Services', Social Services Specialists authorize and arrange for short-term services to allow individuals to remain in their homes and communities. These in-home services can include personal care, nurse visits, respite care, adult day care, and home delivered nutrition services.

This core also includes the Non-Medicaid Eligible (NME) Consumer Directed Services Program, which funds services to meet personal care needs for consumers who are not Medicaid eligible. Individuals must meet annual eligibility requirements regarding income, assets, and need assistance with activities of daily living. State statute places a cap on this program and no new participants may be enrolled. The program is set to sunset June 30, 2025.

PROGRAM LISTING (list programs included in this core funding)

Adult Protective Services Non-Medicaid Eligible (NME) Services

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58845C
Senior and Disability Services		
Core - Adult Protective Services and NME Programs	HB Section	10.805
		

4. FINANCIAL HISTORY

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	972,093	972,093	972,093	872,093
Less Reverted (All Funds)	(24,152)	(24,152)	(12,152)	(21,092)
Less Restricted (All Funds)*	, , ,	0	0	(1,977)
Budget Authority (All Funds)	947,941	947,941	959,941	849,024
Actual Expenditures (All Funds)	779,148	727,973	474,478	N/A
Unexpended (All Funds)	168,793	219,968	485,463	N/A
Unexpended, by Fund:	50.000	405 440	000.400	N1/A
General Revenue	52,068	135,410	330,139	N/A
Federal	116,725	84,557	155,323	N/A
Other	0	0	0	N/A

Actual Expenditures (All Funds)

779,148

727,973

600,000

474,478

200,000

FY 2018

FY 2019

FY 2020

Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

^{*}Current Year restricted amount is as of 7/01/2020.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVINERS & NME PROGRAMS

	122,000	0	92,000	000,07	00.0	33	
						SORE	GOVERNOR'S RECOMMENDED (
	872,093	0	820,731	290'90L	00.0	IstoT	
	£60,717	0	820,28	990,359	00.0	DD	
	122,000	0	92,000	000,07	00.0	33	
							ТЕРАКТМЕИТ СОКЕ КЕQUEST
	872,093	0	167,028	400,805	00.0	IstoT	
	£60,717	0	820,28	990,359	00.0	DD	
	122,000	0	92,000	000,07	00.0	33	
							TAFP AFTER VETOES
noitsnation	∃ lstoT	Other	Federal	В	3T7	Budget Class	
						ا٦	5. CORE RECONCILIATION DETA

820,731

820,28

990'90L

990,359

00.0

00.0

Total

ВD

872,093

717,093

0

0

DECISION ITEM SUMMARY

2ECNKED

DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

2ECNKED

00.0	0\$	00.0	\$60,278\$	00.0	\$872,093	00.0	8८४'४८४\$	JATOT GRAND
00.0	0	00.0	£60,278	00.0	872,093	00.0	874,474	JATOT
00.0	0	00.0	£60,717	00.0	£60,717	00.0	355,772	G9 - JATOT
00.0	0	00.0	82,028	00.0	820,28	00.0	989'9	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	990'989	00.0	990'989	00.0	980,646	PROGRAM-SPECIFIC GENERAL REVENUE
00.0	0	00.0	122,000	00.0	122,000	00.0	907,811	33 - JATOT
00.0	0	00.0	000,88	00.0	000,28	00.0	610,8	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	000,07	00.0	000,07	00.0	789,511	EXPENSE & EQUIPMENT GENERAL REVENUE
								СОВЕ
								APS & NME PROGRAMS
СОГЛШИ	СОГЛШИ	ЭТЯ	DOLLAR	3T7	DOLLAR	3T4	DOLLAR	Fund

BUDGET

FY 2021

AUTDA

EX 2020

AUTDA

FY 2020

Budget Object Summary

Decision Item

Budget Unit

DECISION ITEM DETAIL

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	0411112 421120	• •	000	••		••	000		
	FEDERAL FUNDS	904'11\$	00.0	870,731\$	00.0	8167,028	00.0		00.0
	GENERAL REVENUE	£17,234\$	00.0	990'904\$	00.0	990'904\$	00.0		00.0
ДАТОТ ПИАЯ		874,474\$	00.0	£60,278 \$	00.0	\$60,278\$	00.0	0\$	00.0
Q9 - JATOT		377,335	00.0	£60,717	00.0	£60,717	00.0	0	00.0
UBIATZIO MAAĐOA9	SNOITU8	277,835	00.0	£60,717	00.0	860,717	00.0	0	00.0
33 - JATOT		907,811	00.0	122,000	00.0	122,000	00.0	0	00.0
OTHER EQUIPMENT		30,634	00.0	15,000	00.0	12,000	00.0	0	00.0
СОМРИТЕК ЕДИІРМ	MENT	15,622	00.0	82,000	0.00	000'98	0.00	0	0.00
M&R SERVICES		72,450	0.00	000'99	00.0	92'000	0.00	0	0.00
СОКЕ									
APS & UME PROGRAMS	9								
Budget Object Class	SS	DOLLAR	ЭТЯ	DOLLAR	3T4	DOLLAR	ЭТЯ	СОГЛШИ	СОГЛШИ
Decision Item		AUTOA	AUTOA	BUDGET	BUDGET	рерт кед	DEPT REQ	SECURED	SECNKED
Budget Unit		E A 5050	E A 5050	FY 2021	FY 2021	FY 2022	E A 5055	*****	******

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0\$

OTHER FUNDS

0\$

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Department of Health and Senior Services

Adult Protective Services (Short-term Interventions)

Program is found in the following core budget(s):

DSDS Program
Operations
TOTAL

	DSDS Program				TOTAL
	Operations				TOTAL
GR	299,925				299,925
FEDERAL	167,028				167,028
OTHER	0				0
TOTAL	466,953				466,953

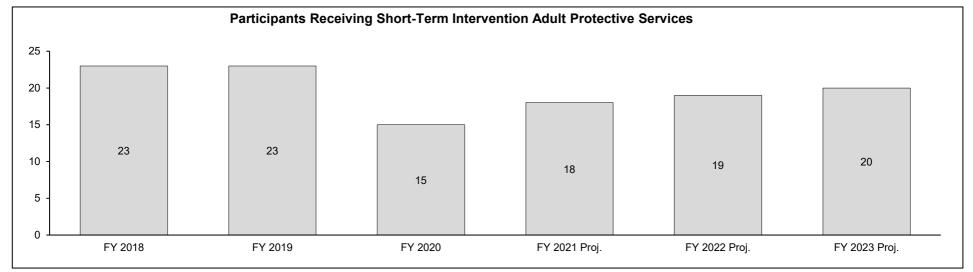
1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need and Enhance access to care.

1b. What does this program do?

The Adult Protective Services short-term interventions program provides temporary services to eligible adults who have been victims of Abuse, Neglect, or Financial Exploitation. Funding for this program pays for emergency services and evaluations to assist/assess the victim in remaining safely in their homes and communities. These non-Medicaid funded services fill the gap while waiting for eligibility for other programs to be determined when no other formal/informal resource is available for needed oversight.

2a. Provide an activity measure(s) for the program.



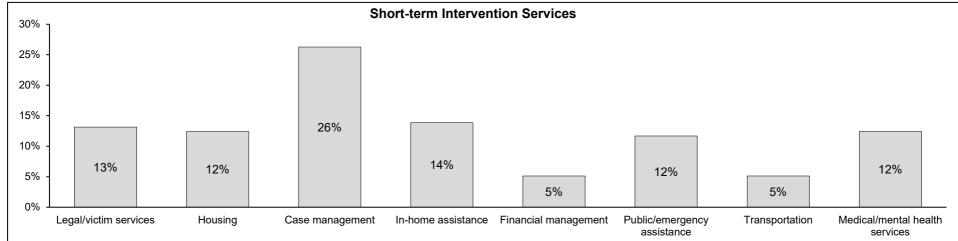
Department of Health and Senior Services

Adult Protective Services (Short-term Interventions)

HB Section(s): 10.805

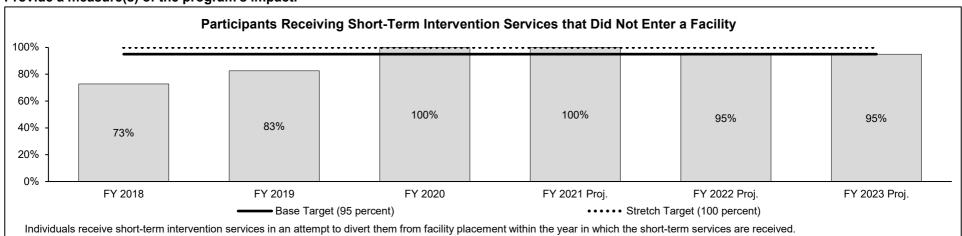
Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality.



Short-term interventions are provided to adults who require a variety of person-centered services. Interventions are based upon individual needs and community availability. The goal of interventions provided is to reduce some of the adult's risk factors, such as assuring community placement over nursing facility care.

2c. Provide a measure(s) of the program's impact.

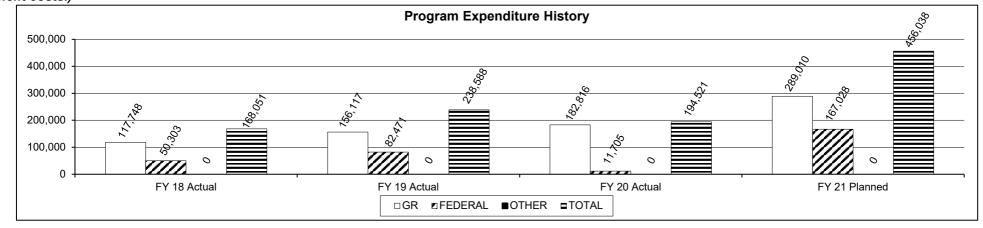


Department of Health and Senior Services 10.805 HB Section(s): Adult Protective Services (Short-term Interventions) Program is found in the following core budget(s): 2d. Provide a measure(s) of the program's efficiency. Annual Cost per Individual for Intervention Services as Compared to Nursing Facility Placement \$50,000 \$40.000 \$30,000 \$43,347 \$42,589 \$41,830 \$20,000 \$40.062 \$41,614 \$38,486 \$10,000 \$1.259 \$1,023 \$1.234 \$1,399 \$1,399 \$1,399 \$0 FY 2018 FY 2019 FY 2020 FY 2021 Proj. FY 2022 Proj. FY 2023 Proj.

Nursing Facility cost data provided by the Department of Social Services, MO HealthNet Division. Short-term intervention services participant cost varies depending upon individual emergent needs.

■ Short-Term Intervention Services Program

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



■ Nursing Facility

Е		
	Department of Health and Senior Services	HB Section(s): 10.805
A	Adult Protective Services (Short-term Interventions)	
F	Program is found in the following core budget(s):	
4	4. What are the sources of the "Other " funds?	
	Not applicable.	
5	5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include	e the federal program number, if applicable.)
	Sections 192.2400 - 192.2505, RSMo.	
6	6. Are there federal matching requirements? If yes, please explain.	
	No.	
7	7. Is this a federally mandated program? If yes, please explain.	
	No.	

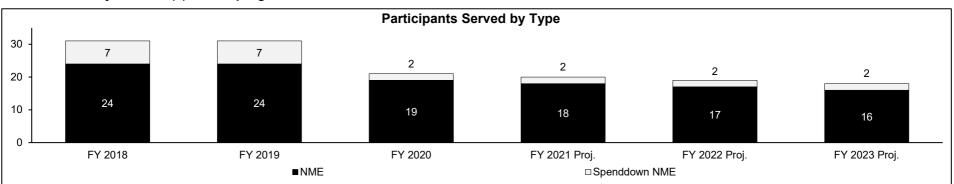
1a. What strategic priority does this program address?

Enhance access to care.

1b. What does this program do?

This program provides Consumer Directed Services (CDS) for Non-Medicaid Eligible (NME) adults with disabilities who need assistance in accessing care or services to perform activities of daily living necessary to maintain independence and dignity in the least restrictive environment of their choice including their homes and communities. Participants must meet all criteria set forth in Sections 208.900 to 208.930, RSMo. The NME program is available only to those participants who were receiving consumer directed services funded through NME prior to June 30, 2005 when program enrollment was frozen; no new participants shall be added to the NME program. The program was designed to assist participants who had extensive health care needs, but did not qualify for Medicaid-funded Home and Community Based Services (HCBS). Participants receiving services funded through the NME program are eligible for those services throughout their lifetime and may be added or removed from the program as necessary. The NME program will sunset on June 30, 2025, unless the program is renewed through legislative action.

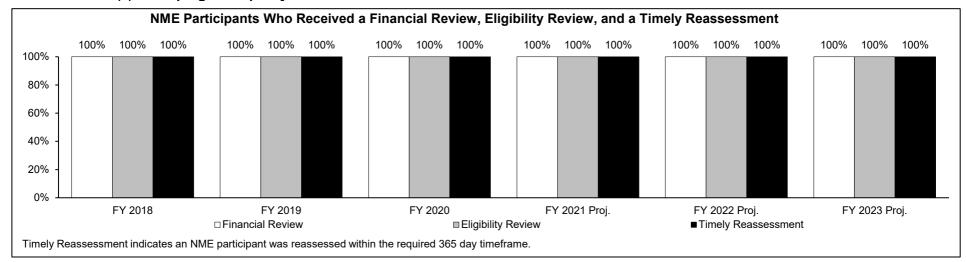
2a. Provide an activity measure(s) for the program.



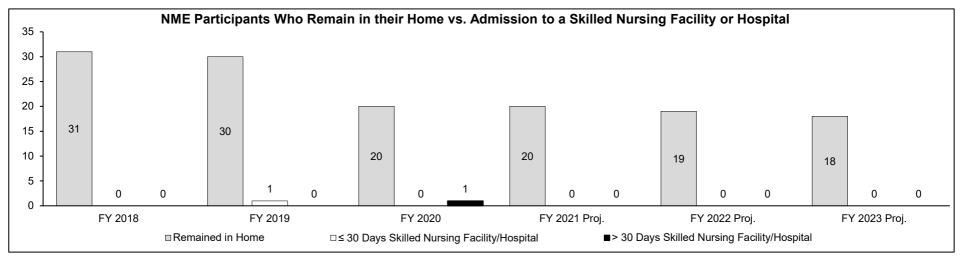
Some Non-Medicaid Eligible participants are Medicaid Spenddown participants who must pay a spenddown amount each month in order to receive Medicaid benefits. The NME program pays these participants spenddown each month. All other participants are not currently eligible for Medicaid nor Medicaid Spenddown. Program reduction could be attributed to death, facility placement, participant choice to close services, or change in Medicaid status.

Department of Health and Senior Services	HB Section(s): 10.805
Non-Medicaid Eligible Service	·
Program is found in the following core budget(s):	

2b. Provide a measure(s) of the program's quality.

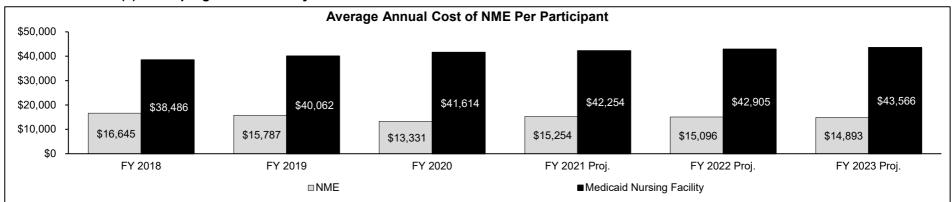


2c. Provide a measure(s) of the program's impact.



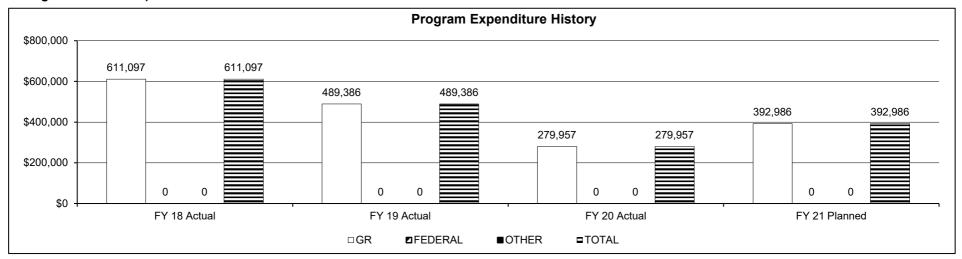
Department of Health and Senior Services	HB Section(s): 10.805
Non-Medicaid Eligible Service	
Program is found in the following core budget(s):	

2d. Provide a measure(s) of the program's efficiency.



NME results in lower expenditures to the state long-term and a cost savings to the participant. Long-term NME allows the participant to receive services and it is anticipated that the participant's assets would be exhausted on average within six months without the NME program resulting in the participant meeting Medicaid eligibility; therefore, increased cost to the state. Beginning FY 2018, all Medicaid Consumer Directed Service participants, including NME participants, had care plan reductions to 60 percent of the average nursing facility cost per House Bill No 10, Section 10.806.

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



De	epartment of Health and Senior Services	HB Section(s): 10.805
No	on-Medicaid Eligible Service	· · · · · · · · · · · · · · · · · · ·
Pr	ogram is found in the following core budget(s):	
4.	What are the sources of the "Other " funds?	
	Not applicable.	
5.	What is the authorization for this program, i.e., federal or state statute, etc.? (I	nclude the federal program number, if applicable.)
	Sections 208.900 to 208.930, RSMo. Program sunsets on June 30, 2025 per Section	n 208.930.12, RSMo.
6.	Are there federal matching requirements? If yes, please explain.	
	No.	
7.	Is this a federally mandated program? If yes, please explain.	
	No.	

CORE DECISION ITEM

Health and Senior Services
Senior and Disability Services
Core - Medicaid Home and Community-Based Services
HB Section 10.815

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 202	2 Governor's F	Recommendat	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	500,000	0	500,000	EE	0	0	0	0
PSD	152,048,897	283,533,635	0	435,582,532	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	152,048,897	284,033,635	0	436,082,532	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
1									

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

2. CORE DESCRIPTION

Home and Community-Based Services (HCBS) afford Medicaid eligible seniors and adults with physical disabilities control over and access to a full array of long-term services and supports in the community that promote independence, health, and quality of life. Examples of HCBS include personal care, attendant care, nurse visits, adult day care, homemaker, respite, and home delivered meals for eligible adults; and additional services including adaptive equipment, private duty nursing, health screenings, and subsequent treatment for identified health problems for children including specialized medical equipment and critical medical supplies for eligible participants.

The Division of Senior and Disability Services (DSDS) is responsible for HCBS eligibility determination and authorization. DSDS manages HCBS benefits authorized under the Medicaid State Plan, and administers the Aged and Disabled Waiver, Adult Day Care Waiver, and the Independent Living Waiver that provide HCBS benefits to seniors and adults with disabilities who would otherwise be eligible to receive care in a skilled nursing facility. The Division of Community and Public Health (DCPH) manages the Healthy Children and Youth benefits authorized under the Medicaid State Plan and administers the AIDS Waiver and the Medically Fragile Adults Waiver that provide HCBS benefits to individuals with serious and complex medical needs who would otherwise be eligible to receive care in an intermediate care facility.

This core also contains funding to reimburse providers for annual reassessments of participants as required by Section 208.906, RSMo.

3. PROGRAM LISTING (list programs included in this core funding)

Medicaid Home and Community-Based Services

CORE DECISION ITEM

Health and Senior Services

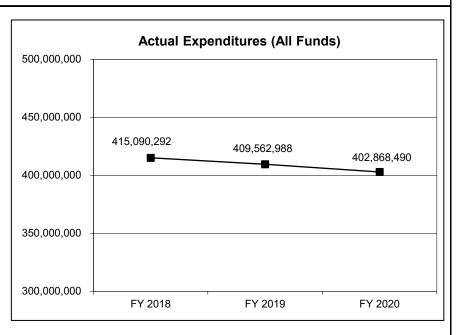
Senior and Disability Services

Core - Medicaid Home and Community-Based Services

HB Section 10.815

4. FINANCIAL HISTORY

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	457,570,615	427,496,889	436,082,532	436,082,532
Less Reverted (All Funds)	0	0	0	0
Less Restricted (All Funds)	0	0	(6,000,000)	0
Budget Authority (All Funds)	457,570,615	427,496,889	430,082,532	436,082,532
Actual Expenditures (All Funds)	415,090,292	409,562,988	402,868,490	N/A
Unexpended (All Funds)	42,480,323	17,933,901	27,214,042	N/A
Unexpended, by Fund: General Revenue Federal Other	7,408,407 35,071,916 0	6,420,860 11,513,041 0	5,648,158 21,565,884 0	N/A N/A N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: In FY 2018, the Consumer Directed Services program was moved to a separate House Bill section.

CORE RECONCILIATION DETAIL

MEDICAID HOME & COM BASED SVC

	420,964,056	0	₹16,001,47	146,854,139	00.0	IstoT			
	990'†99'61†	0	716,631,572	146,504,139	00.0	 BD			
	1,300,000	0	000'096	320,000	00.0	33			
						SORE	ирер с	JMMC	солевиов'я весс
	420,964,056	0	₹16,001,47	146,854,139	00.0	IstoT			
	990'799'617	0	716,931,572	146,504,139	00.0	ьD			
	1,300,000	0	000'096	320,000	00.0	33			
							TS∃N	E BEC	DEPARTMENT COR
h h h h h h	(15,118,476)	0	(817,826,9)	(837,491,3)	00.0	HANGES	О ТИЗИ	ІТЯАЧ	NET DEI
Reallocation to align with actual program expenditures.	(817,676,01)	0	(817,878,01)	0	00.0	БD	5029	451	Core Reallocation
brogram expenditures.									
Reallocation to align with actual	(8,544,758)	0	0	(837,443,8)	00.0	ЬD	2028	451	Core Reallocation
program expenditures.									
program expenditures. Reallocation to align with actual	420,000	0	420,000	0	00.0	33	2029	451	Core Reallocation
Reallocation to align with actual	320,000	0	0	320,000	00.0	33	2028	451	Core Reallocation
						STN	JMT2U	LQA 3	DEPARTMENT COR
	436,082,532	0	284,033,635	168,840,231	00.0	IstoT			
	435,582,532	0	283,533,635	152,048,897	00.0				
	200,000	0	200,000	0	00.0	33			
								S	TAFP AFTER VETOE
Explanation	lstoT	:µer	Federal Of	ЯЭ	3T4	Budget Class			
						ור	IAT30 v	IOITAI	2. CORE RECONCIL

DECISION ITEM SUMMARY

EX 2022

EX 2022

FY 2021

00.0	0\$	00.0	990'796'077\$	00.0	\$436,082,532	00.0	064,868,204\$	ЛАТОТ ПИАЯ Э
00.0	0	00.0	450,964,056	00.0	436,082,532	00.0	06 1 ,838,20 1	J ∆ ТОТ
00.0	0	00.0	990'†99'61†	00.0	435,582,532	00.0	401,573,564	aq - JΑΤΟΤ
00.0	0	00.0	716,631,572	00.0	283,533,635	00.0	563,416,966	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	146,504,139	00.0	168,840,521	00.0	138,156,598	PROGRAM-SPECIFIC GENERAL REVENUE
00.0	0	00.0	1,300,000	00.0	200,000	00.0	ا '56⊄'65و	33 - JATOT
00.0	0	00.0	000'096	00.0	200,000	00.0	801,849	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	320,000	00.0	0	00.0	321,823	EXPENSE & EQUIPMENT GENERAL REVENUE
								COKE
								MEDICAID HOME & COM BASED SVC
СОГЛИИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	3T4	DOLLAR	Fund
SECURED	SECNKED	DEPT REQ	рерт кед	BUDGET	BUDGET	AUTOA	AUTDA	Budget Object Summary

FY 2021

FY 2020

FY 2020

Decision Item

Budget Unit

DECISION ITEM DETAIL

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		••		••		••			
	FEDERAL FUNDS	690'09£' 7 9Z\$	00.0	\$284,033,635	00.0	₹274,109,917	00.0		00.0
	GENERAL REVENUE	138,508,421	00.0	\$162,048,897	00.0	8146,854,139	00.0		00.0
JATOT 		064,868,204\$	00.0	\$436,082,532	00.0	990'796'077\$	00.0	0\$	00.0
Q9 - JATOT		401,573,564	00.0	436,582,532	00.0	990'799'617	00.0	0	00.0
UBIATZIO MAAĐOA9	SNOITU	401,573,564	00.0	435,582,532	00.0	990'799'617	00.0	0	00.0
33 - JATOT		1,294,926	00.0	200,000	00.0	1,300,000	00.0	0	00.0
PROFESSIONAL SER/		1,294,926	00.0	200,000	00.0	1,300,000	00.0	0	00.0
СОКЕ									
MEDICAID HOME & COM E	BASED SVC								
Budget Object Class	•	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	3T4	СОГЛШИ	СОГЛШИ
Decision Item		AUTOA	AUTOA	BUDGET	BUDGET	рерт кед	рерт кед	SECURED	SECNBED
Budget Unit		FY 2020	FY 2020	FY 2021	FY 2021	FY 2022	FY 2022	*****	*****

00.0

0\$

OTHER FUNDS

0\$

Page 61 of 81 9/21/20 10:39

00.0

CORE DECISION ITEM

Senior and Disability Services	Budget Unit 58844C
Core - Medicaid HCBS/Consumer Directed Services	HB Section 10.810
1. CORE FINANCIAL SUMMARY	
FY 2022 Budget Request GR Federal Other Total	FY 2022 Governor's Recommendation GR Fed Other Total

	GR	Federal	Other	Total	
PS	0	0	0	0	
EE	0	0	0	0	
PSD	172,810,926	322,817,967	0	495,628,893	
TRF	0	0	0	0	
Total	172,810,926	322,817,967	0	495,628,893	
FTE	0.00	0.00	0.00	0.00	
Est. Fringe	0	0	0	0	

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

	FY 2022 Governor's Recommendation								
	GR	Fed	Other	Total					
PS	0	0	0	0					
EE	0	0	0	0					
PSD	0	0	0	0					
TRF	0	0	0	0					
Total	0	0	0	0					
FTE	0.00	0.00	0.00	0.00					
Est. Fringe	0	0	0	0					

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

2. CORE DESCRIPTION

Home and Community-Based Services (HCBS) State Plan Consumer Directed Services (CDS) afford Medicaid eligible seniors and adults with physical disabilities control over and access to a full array of long-term services and supports in the community that promote independence, health, and quality of life. Consumer Directed personal care assistance supports activities of daily living and/or instrumental activities of daily living provided as an alternative to nursing facility placement to persons with a physical disability. The consumer is responsible for hiring, training, supervising, and directing the personal care attendant.

The Division of Senior and Disability Services (DSDS) is responsible for HCBS level of care eligibility determination and service authorizations.

3. PROGRAM LISTING (list programs included in this core funding)

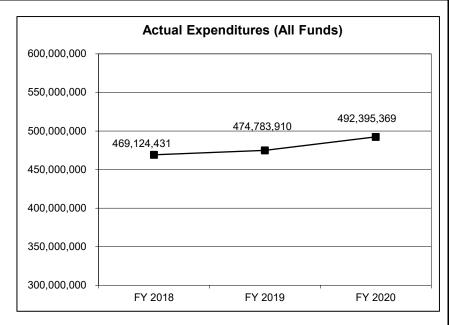
Home and Community Based Services - Consumer Directed Services

CORE DECISION ITEM

Health and Senior Services	Budget Unit 58844C
Senior and Disability Services	
Core - Medicaid HCBS/Consumer Directed Services	HB Section 10.810

4. FINANCIAL HISTORY

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	469,289,062	488,573,691	495,628,893	495,628,893
Less Reverted (All Funds) Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	469,289,062	488,573,691	495,628,893	0
Actual Expenditures (All Funds) Unexpended (All Funds)	469,124,431 164,631	474,783,910 13,789,781	492,395,369 3,233,524	N/A N/A
			-,,-	
Unexpended, by Fund: General Revenue Federal Other	151,772 12,859 0	5,247,439 8,542,342 0	1,340,178 1,893,346 0	N/A N/A N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: In FY 2018, the Consumer Directed Services Program was moved to a separate House Bill section.

CORE RECONCILIATION DETAIL

CONSUMER DIRECTED

							—	VITA NALIVI	9' COKE KECONCILI
noitsna	Iqx∃ lstoT		Other	Federal	ЯЭ	314	Budget Class		
	68,829,893	7 0		796,718,228	926,018,271	00.0	ЬD	S	ЭОТЭV ЯЭТЧА ЧЧАТ
	868,829,893			322,817,967	926,018,271	00.0	Total		
							STN	AMTSULGA 3	DEPARTMENT CORI
llocation to align with actual ram expenditures.		0		817,829,9	0	00.0	ЬD	450 3930	Core Reallocation
llocation to align with actual Iram expenditures.		0		0	894' 7 61'9	00.0	ББ	420 3929	Core Reallocation
	974,811,31	0		817,629,9	89 7 ,461,8	00.0	SEENAH	O TNEMTA4	NET DEI
	000 272 07.	3 0		100 772 000	700 300 027	00 0	dd	E REQUEST	DEPARTMENT CORI
	698,747,018			332,747,285	\$89°900°841	00.0			
	<u></u>	c 0		332,741,685	789°900°841	00.0	Total		
	698 272 019	9 0		332,741,685	189 300 871	00.0	ВD ВD	оммеирер с	ООЛЕВИОВ. В ВЕСС
	698,747,018				789'900'821				
	698,747,018	<u>. </u>		332,741,685	1789,800,871	00.0	Total		

DECISION ITEM SUMMARY

2ECNKED

DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

SECNKED

00.0	0\$	00.0	\$9£'797'7£9\$	00.0	\$495,628,893	00.0	696,396,396	ЛАТОТ ПИАЯ Э
00.0	0	00.0	264,583,492	00.0	0	00.0	0	J A TOT
00.0	0	00.0	264,883,8	00.0	0	00.0	0	Q9 - JATOT
00.0	0	00.0	3,713,297	00.0	0	00.0	0	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	961,078,1	00.0	0	00.0	0	GENEKAL REVENUE PROGRAM-SPECIFIC
								FY 22 HCBS - Utilization Incr - 1580010
00.0	0	00.0	703,1 <u>5</u> 0,71	00.0	0	00.0	0	JATOT
00.0	0	00.0		00.0	0	00.0	0	G9 - JATOT
00.0	0	00.0	71,5962,11	00.0	0	00.0	0	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	6,325,293	00.0	0	00.0	0	PROGRAM-SPECIFIC GENERAL REVENUE
								FY 22 HCBS - Cost to Continue - 1580009
00.0	0	00.0	698,747,013	00.0	495,628,893	00.0	492,395,369	JATOT
00.0	0	00.0	698,747,018	00.0		00.0	492,395,369	αq - JΑΤΟΤ
00.0	0	00.0	332,741,685	00.0	322,817,967	00.0	187,671,828	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	178,005,684	00.0	926,018,271	00.0	169,215,638	GENEKAN-SPECIFIC
								СОВЕ
								CONSUMER DIRECTED
СОГЛШИ	СОГЛШИ	317	ВОГГАК	3T7	DOLLAR	3T7	DOLLAR	Fund

BUDGET

FY 2021

AUTDA

EX 2020

AUTDA

FY 2020

9/21/20 10:38 im_disummary

Budget Object Summary

Decision Item

Budget Unit

FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58844C and 58847	'C	DEPARTMENT : D	epartment of Health and Senior Services
BUDGET UNIT NAME: Division of Senior and	Disability Services		
HOUSE BILL SECTION: 10.810 and 10.815		DIVISION: Division	n of Senior and Disability Services
1. Provide the amount by fund of personal	service flexibility and the a	amount by fund of	expense and equipment flexibility you are
			lexibility is being requested among divisions,
provide the amount by fund of flexibility you	are requesting in dollar a	and percentage ter	ms and explain why the flexibility is needed.
	DEPARTME	NT REQUEST	
			gency Directed Services that the legislature approved in FY
•	ed and Agency Model Programs	s make it difficult to e	stimate which budget line the Medicaid expenditures will incur
under.			
2. Estimate how much flexibility will be use	ed for the budget year. Ho	w much flexibility	was used in the Prior Year Budget and the Current
Year Budget? Please specify the amount.			
	CURRENT Y		BUDGET REQUEST
PRIOR YEAR	ESTIMATED AMO		ESTIMATED AMOUNT OF
ACTUAL AMOUNT OF FLEXIBILITY USED	FLEXIBILITY THAT W		FLEXIBILITY THAT WILL BE USED
\$0	HB 10.810 and 10.815 languag		Expenditures will differ annually based on needs to cover
	percent (10%) flexibility between		operational expenses, address emergency and changing
	Directed and Agency Directed	Services.	situations, etc. In addition, the level of governor's reserve,
			restrictions, and core reductions impact how the flexibility will be used, if at all. The department's requested flex will allow
			the department to utilize available resources in the most
			effective manner as the need arises. The department cannot
			predict how much flexibility will be utilized.
3. Please explain how flexibility was used in the	prior and/or current years.		p
	•		
PRIOR YEAR			CURRENT YEAR
EXPLAIN ACTUAL US Not applicable.	<u>;</u> E	Not applicable.	EXPLAIN PLANNED USE
чот арріїсавіе.		посарисавіе.	
	· ·		

DECISION ITEM DETAIL

00.0		00.0	0\$	00.0	0\$	00.0	0\$	OTHER FUNDS
00.0		00.0	\$332,741,685	00.0	4322,817,967	00.0	167,671,626\$	FEDERAL FUNDS
00.0		00.0	\$4178,005,684	00.0	926,018,271\$	00.0	8169,215,638	GENERAL REVENUE
00.0	0\$	00.0	698,747,013\$	00.0	\$495,628,893	00.0	69E'36E'76 1 \$	DATOT GNARÐ
00.0	0	00.0	696,747,018	00.0	495,628,893	00.0	492,395,369	G9 - JATOT
00.0	0	00.0	698,747,013	00.0	495,628,893	00.0	492,395,369	SNOITUBIATZIQ MAAƏOA9
								СОВЕ
								CONSUMER DIRECTED
СОГЛШИ	СОГЛШИ	ЭТЭ	DOLLAR	ЭТЯ	DOLLAR	ЭТЯ	DOLLAR	Budget Object Class
SECURED	SECNKED	DEPT REQ	DEPT REQ	BUDGET	BUDGET	AUTDA	AUTOA	Decision Item
*******	******	FY 2022	FY 2022	₽¥ 2021	FY 2021	FY 2020	FY 2020	Budget Unit

9\21\20 10:39 Page 58 of 81 im didetail

Department of Health and Senior Services HB Section(s): 10.810, 10.815 Medicaid Home and Community-Based Services (HCBS) Program is found in the following core budget(s): Medicaid HCBS-CDS Medicaid HCBS TOTAL GR 178.005.684 146.854.139 324.859.823 **FEDERAL** 332.741.685 274.109.917 606,851,602 OTHER 0

1a. What strategic priority does this program address?

Enhance access to care.

TOTAL

1b. What does this program do?

- This program provides Medicaid Home and Community Based Services (HCBS) to allow children and adults with disabilities, as well as to remain safely and independently in the least restrictive environment as an alternative to institutional care.
- Program Medicaid eligibility is determined by the Department of Social Services. Family Support Division (FSD). Service eligibility requires all participants to meet nursing facility level of care (LOC). Department of Health and Senior Services (DHSS) staff complete LOC assessments to determine whether HCBS participants are at a functional level of need that would require institutional care without the assistance of HCBS. Program eligibility is reassessed annually.
- HCBS provides assistance with Activities of Daily Living (ADL) and Instrumental Activities of Daily Living (IADL). ADLs include assistance with dressing, grooming, meal preparation, bathing, toileting, etc. IADLs include laundry, light housework, financial management services, grocery shopping, transportation, etc.

510,747,369

- HCBS includes the following waiver and state plan services:

 o Adult Day Care Waiver: provides Adult Day Care services to adults aged 18 to 63 in an effort to promote community and social engagement;
 - AIDS Waiver: provides personal care and support services to Missourians diagnosed with HIV; 0

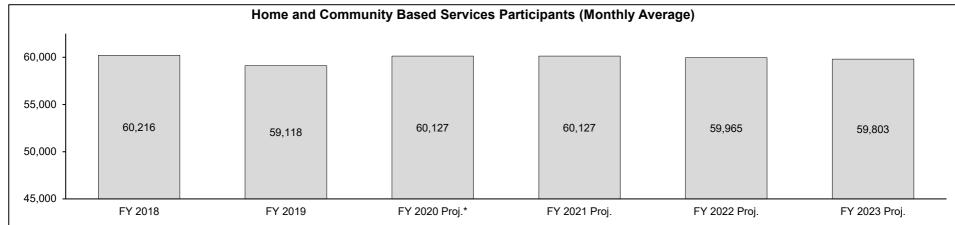
420,964,056

- Aged and Disabled Waiver: provides Homemaker, Respite, Chore, and Adult Day Care services to adults aged 63+ to ensure each participant has the tools and support needed to remain in the least restrictive environment possible;
- Healthy Children and Youth Program: provides personal care services to Missourians under the age of 21 with complex medical needs whose 0 needs cannot be met through Missouri's State Plan programs:
- Independent Living Waiver: provides self-direction services beyond the allowable maximum of the Consumer Directed Services program to adults 0 aged 18 to 63 in order to provide the support necessary for participants to remain in their homes and communities;
- Medically Fragile Adult Waiver: provides personal care services to Missourians aged 21+ with complex medical needs; and; 0
- State Plan Personal Care (Agency-Model and Consumer Directed) services: provides personal care and other support services to adults aged 18+ in order to allow them to remain in their homes and communities as an alternative to institutional care.

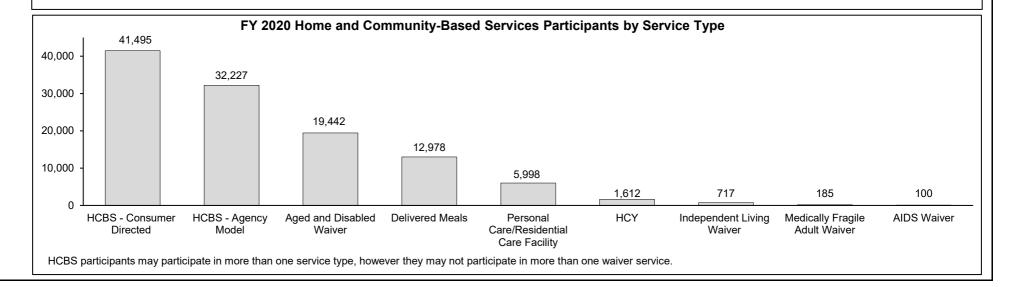
931,711,425

Department of Health and Senior Services	HB Section(s): 10.810, 10.815
Medicaid Home and Community-Based Services (HCBS)	
Program is found in the following core budget(s):	

2a. Provide an activity measure(s) for the program.



The program participation decrease from FY 2018 to FY 2019 was a result of legislation wherein the Level of Care (LOC) score requirement for admission to a Skilled Nursing Facility or HCBS was raised from 21 to 24.



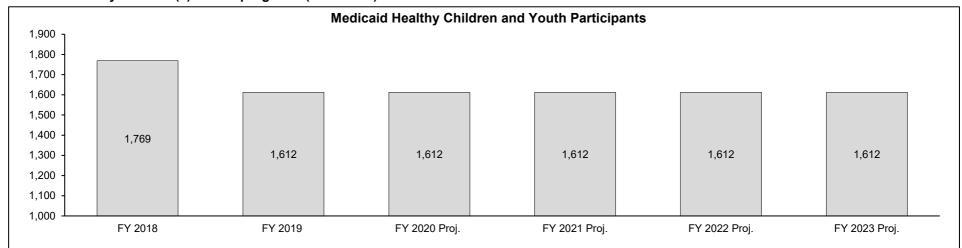
Department of Health and Senior Services

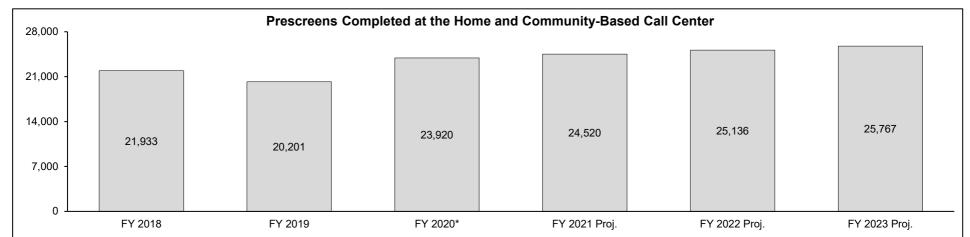
Medicaid Home and Community-Based Services (HCBS)

Program is found in the following core budget(s):

HB Section(s): 10.810, 10.815

2a. Provide an activity measure(s) for the program. (continued)



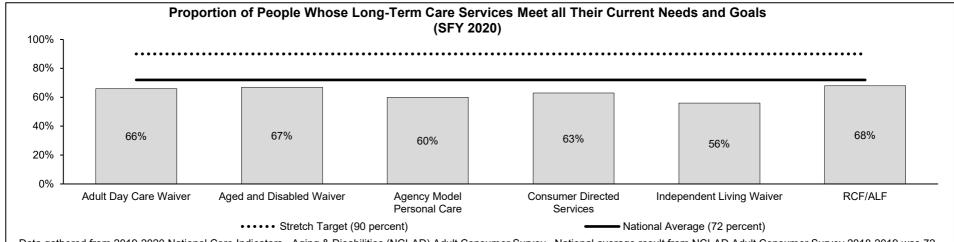


The HCBS Prescreen is an eligibility tool designed to assess preliminary eligibility for HCBS. HCBS applicants who meet preliminary requirements at the Prescreen are referred to DSDS staff for a comprehensive LOC assessment.

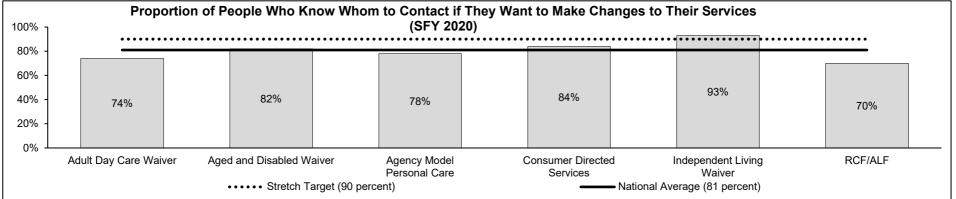
*FY 2020: Prescreen no longer includes preliminary LOC assessment. Prescreen consists of confirming Medicaid eligibility prior to referring for comprehensive assessment.

Department of Health and Senior Services HB Section(s): 10.810, 10.815 Medicaid Home and Community-Based Services (HCBS) Program is found in the following core budget(s):

Provide a measure(s) of the program's quality.



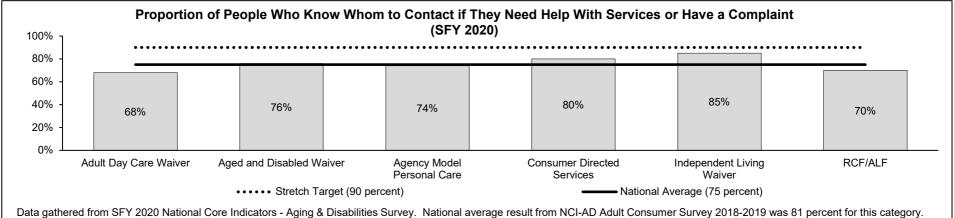
Data gathered from 2019-2020 National Core Indicators - Aging & Disabilities (NCI-AD) Adult Consumer Survey. National average result from NCI-AD Adult Consumer Survey 2018-2019 was 72 percent for this category.

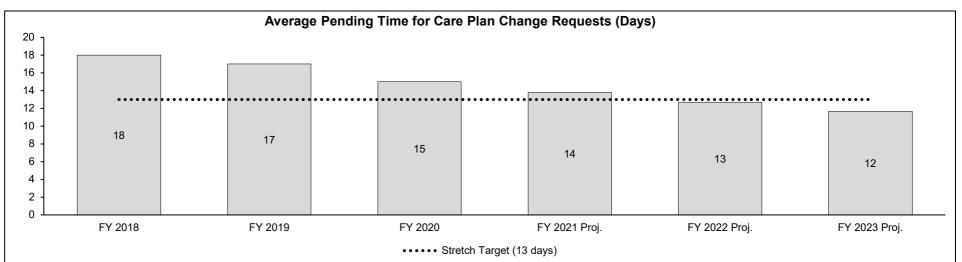


Data gathered from 2019-2020 National Core Indicators - Aging & Disabilities (NCI-AD) Adult Consumer Survey. National average result from NCI-AD Adult Consumer Survey 2018-2019 was 81 percent for this category.

Department of Health and Senior Services	HB Section(s): 10.810, 10.815
Medicaid Home and Community-Based Services (HCBS)	
Program is found in the following core budget(s):	

2b. Provide a measure(s) of the program's quality (continued)





Person Centered Care Planning (PCCP) teams perform HCBS care plan maintenance activities such as service increases, decreases, and provider changes. These requests are often requested from an HCBS participant as their needs change over time; therefore, reaction time to the participant requests for evaluation is vital.

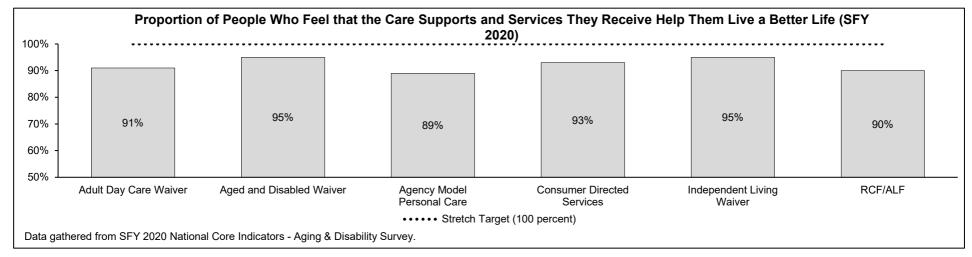
Department of Health and Senior Services

Medicaid Home and Community-Based Services (HCBS)

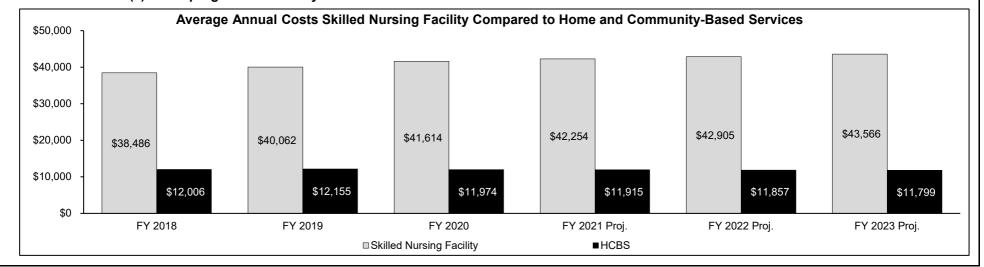
Program is found in the following core budget(s):

HB Section(s): 10.810, 10.815

2c. Provide a measure(s) of the program's impact. How much effort is invested to achieve impact.

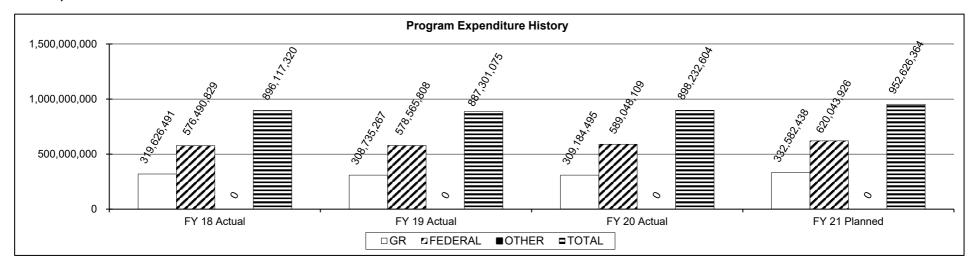


2d. Provide a measure(s) of the program's efficiency.



Department of Health and Senior Services	HB Section(s): 10.810, 10.815
Medicaid Home and Community-Based Services (HCBS)	
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other" funds?

Not applicable.

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Title XIX and Title XX of the Social Security Act; PL 89-73 Older Americans Act, updated in 2006 by PL 109-365; and Sections 192.2000, 192.2400 to 192.2505, 208.152, and 208.900 to 208.930, RSMo.

6. Are there federal matching requirements? If yes, please explain.

Yes, HCBS provided under State Plan Personal Care, the Adult Day Care Waiver, the Aged and Disabled Waiver, the Independent Living Waiver, the AIDS Waiver, the Medically Fragile Adult Waiver, and Healthy Children and Youth (HCY) are matched by General Revenue according to the standard Federal Medical Assistance Percentage (FMAP) rate for activities related to home and community-based care for eligible participants.

7. Is this a federally mandated program? If yes, please explain.

No. Due to Missouri opting to offer HCBS, oversight of federal funding is required for use of Title XIX and Title XX of the Social Security Act funds and PL 89-73, Older Americans Act. Additional oversight of the Medicaid HCBS waivers is required by the Centers for Medicare and Medicaid.

RANK: 6

Department o	f Health and Se	nior Services			Budget Unit <u></u>	58844C			
Division of Se	nior and Disab	ility Services			_				
Medicaid HCE	SS Cost-to-Cont	tinue		DI# 1580009	HB Section _	10.810			
1. AMOUNT O	OF REQUEST								
		FY 2022 Budg	et Request			FY 202	2 Governor's	Recommend	ation
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	6,325,293	11,596,214	0	17,921,507	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	6,325,293	11,596,214	0	17,921,507	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
•	budgeted in Hoเ	•		•	Note: Fringes	•		•	_
budgeted direc	tly to MoDOT, H	lighway Patrol,	and Conserv	vation.	budgeted dire	ctly to MoDO	T, Highway Pa	trol, and Cons	servation.
2. THIS REQU	EST CAN BE C		AS:						
	New Legislat				ew Program	_		Fund Switch	
	Federal Man	date			rogram Expansion	_		Cost to Contin	
	GR Pick-Up				pace Request	_	E	Equipment Re	placement
·	Pay Plan				ther:	_	<u> </u>		

3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

Funding is requested to continue providing Home and Community Based Services (HCBS) for Medicaid participants receiving long-term care in their homes and communities. HCBS include: Medicaid State Plan Personal Care, Independent Living Waiver, Adult Day Care Waiver, and the Aged and Disabled Waiver administered by the Division of Senior and Disability Services; and the AIDS Waiver; Medically Fragile Adult Waiver; and Healthy Children and Youth Program administered by the Division of Community and Public Health. Funding is requested to cover anticipated costs due to an increased number of eligible individuals utilizing the program and an increased amount of services per client. This request is not associated with expansion of the program or eligibility requirements. The federal authority for this program is the Social Security Act Sections 1894, 1905(a)(7), 1905(a)(24), 1915(c), and 1934; 42 CFR 440.130, 440.170(f), 440.180, 440.210 and 460. The state authority for this program is Sections 208.152, 208.168, and 192.2000.1., RSMo.

RANK:	6	OF_	14
		_	

Department of Health and Senior Services		Budget Unit 58844C
Division of Senior and Disability Services		
Medicaid HCBS Cost-to-Continue	DI# 1580009	HB Section 10.810

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

The combined FY 2021 core amount available for both In-Home HCBS and CDS totals \$931,711,425, which includes \$324,859,823 state funds and \$606,851,602 federal funds. Projected expenditures for FY 2021 exceed the amount available by \$6,325,293 GR and \$11,596,214 FED. The Department of Health and Senior Services is unable to project exactly whether the projected shortfall will in occur in Consumer Directed Services (CDS) claims or In-Home HCBS, therefore, the request is for the combined projected shortfall.

FY 2021 Blended FMAP	34.867%	65.133%	100.00%	34.867%	65.133%	100.00%	
	State	Federal	Total	State	Federal	Total	Net
	10.81	5 HCBS In-H	lome	10.			
FY 2021 Available Core	146,854,139	274,109,917	420,964,056	178,005,684	332,741,685	510,747,369	931,711,425
FY 2021 Projected	(146,854,139)	(274,109,917)	(420,964,056)	(184,330,977)	(344,337,899)	(528,668,876)	(949,632,932)
FY 2021 Shortfall	0	0	0	(6,325,293)	(11,596,214)	(17,921,507)	(17,921,507)

5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.										
	Dept Req GR	Dept Req GR	Dept Req FED	Dept Req FED	Dept Req OTHER	Dept Req OTHER	Dept Req TOTAL	Dept Req TOTAL	Dept Req One-Time	
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	
Program Distributions (800)	6,325,293		11,596,214		0		17,921,507		0	
Total PSD	6,325,293		11,596,214		0		17,921,507		0	
Grand Total	6,325,293	0.0	11,596,214	0.0	0	0.0	17,921,507	0.0	0	

NEW	DEC	ISION	ITEM

	RANK:		OF_	14	_		
De	partment of Health and Senior Services	Bu	dget Unit 58	3844C			
Div	vision of Senior and Disability Services				-		
Ме	edicaid HCBS Cost-to-Continue DI# 1580009	НВ	Section 10).810	_		
6.	PERFORMANCE MEASURES (If new decision item has an associated	d core, sepa	rately identi	ify project	ted performance with & without additional funding.)		
6a.	Provide an activity measure(s) for the program.	6b.	Provide a	measure(s) of the program's quality.		
	Since this decision item is a request for the increase in authority of an existing program, the measures are incorporated in the individual progradescriptions.	am	Since this decision item is a request for the increase in authority of an existing program, the measures are incorporated in the individual program descriptions.				
6c.	Provide a measure(s) of the program's impact.	6d.	Provide a	measure(s) of the program's efficiency.		
	Since this decision item is a request for the increase in authority of an existing program, the measures are incorporated in the individual progradescriptions.	am		gram, the	em is a request for the increase in authority of an measures are incorporated in the individual program		
7.	STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TA	ARGETS:					
	Not applicable.						

DECISION ITEM DETAIL

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00.0	0	00.0	703,1 <u>2</u> 6,71	00.0	0	00.0	0	G9 - JATOT
00.0	0	00.0	702,126,71	00.0	0	00.0	0	PROGRAM DISTRIBUTIONS
								FY 22 HCBS - Cost to Continue - 1580009
								CONSUMER DIRECTED
СОГЛИИ	СОГЛШИ	ЭТЯ	DOLLAR	3T7	DOLLAR	ЭТЯ	DOLLAR	Budget Object Class
SECURED	SECURED	DEPT REQ	рерт кед	BUDGET	BUDGET	AUTOA	AUTOA	Decision Item
******	*****	E A 50 55	FY 2022	FY 2021	FY 2021	FY 2020	EA 2020	Budget Unit

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OTHER FUNDS

FEDERAL FUNDS

GENERAL REVENUE

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OF

14

RANK: 6

Dopuitinont of t	lealth and Sei	nior Services			Budget Unit_	58844C	_		
Division of Seni	or and Disabi	lity Services			_				
Medicaid HCBS	Utilization Inc	crease		DI# 1580010	HB Section 1	0.810			
1. AMOUNT OF	REQUEST								
		FY 2022 Budg	et Request			FY 2022	Governor's	Recommend	ation
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	1,870,195	3,713,297	0	5,583,492	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	1,870,195	3,713,297	0	5,583,492	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes bu	idgeted in Hou	se Bill 5 excep	t for certain f	ringes	Note: Fringes	budgeted in Ho	ouse Bill 5 ex	cept for certa	in fringes
budgeted directly	to MoDOT, H	ighway Patrol,	and Conserv	ation.	budgeted direc	tly to MoDOT,	Highway Pat	trol, and Cons	ervation.
2. THIS REQUES	ST CAN BE CA	ATEGORIZED	AS:						
	New Legislati	on			w Program		F	und Switch	
	Federal Mand	late			gram Expansion	_	C	Cost to Continu	ue
	GR Pick-Up				ace Request		E	quipment Rep	olacement
	_Ortification		_	Х	er: Utilization Incre				

RANK: 6 OF	14
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Department of Health and Senior Services		Budget Unit 58844C
Division of Senior and Disability Services		
Medicaid HCBS Utilization Increase	DI# 1580010	HB Section 10.810

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

The FY 2021 core amount available for HCBS totals \$931,711,425, which includes \$324,859,823 state funds and \$606,851,602 federal funds. The Cost-to-Continue request will carry forward the FY 2021 supplemental amount of \$6,325,293 General Revenue and \$11,596,215 federal funds to the FY 2022 budget. In addition, an estimated \$1,870,195 General Revenue and \$3,713,297 federal funds are necessary to account for caseload growth and increased service utilization.

5. BREAK DOWN THE REQUEST BY BUD	GET OBJECT	CLASS, JO	B CLASS, AN	D FUND SO	URCE. IDEN	ΓΙ <mark>ΕΥ ΟΝΕ-Τ</mark> Ι	ME COSTS.		
	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req
	GR	GR	FED	FED	OTHER	OTHER	TOTAL	TOTAL	One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
									_
Program Distributions (800)	1,870,195		3,713,297				5,583,492		
Total PSD	1,870,195		3,713,297	•	0		5,583,492		0
Grand Total	1,870,195	0.0	3,713,297	0.0	0	0.0	5,583,492	0.0	0

6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)

6a. Provide an activity measure(s) for the program.

Since this decision item is a request for the increase in authority of an existing program, the measures are incorporated in the individual program descriptions.

6c. Provide a measure(s) of the program's impact.

Since this decision item is a request for the increase in authority of an existing program, the measures are incorporated in the individual program descriptions.

6b. Provide a measure(s) of the program's quality.

Since this decision item is a request for the increase in authority of an existing program, the measures are incorporated in the individual program descriptions.

6d. Provide a measure(s) of the program's efficiency.

Since this decision item is a request for the increase in authority of an existing program, the measures are incorporated in the individual program descriptions.

	RANK:	6 OF	= <u> </u>	
Department of Health and Senior Services		Budget Unit	t 58844C	
Division of Senior and Disability Services				
Medicaid HCBS Utilization Increase	DI# 1580010	HB Section	10.810	
7. STRATEGIES TO ACHIEVE THE PERFORMA	NCE MEASUREMENT TA	RGETS:		
N/A				

DECISION ITEM DETAIL

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GENERAL REVENUE	0\$	00.0	0\$	00.0	961,078,1\$	00.0		00.0
JATOT UNARĐ	0\$	00.0	0\$	00.0	26 †283'485	00.0	0\$	00.0
Q9 - JATOT	0	00.0	0	00.0	267'889'9	00.0	0	00.0
PROGRAM DISTRIBUTIONS	0	00.0	0	00.0	264,883,492	00.0	0	00.0
FY 22 HCBS - Utilization Incr - 1580010								
CONSUMER DIRECTED								
Budget Object Class	DOLLAR	3T4	DOLLAR	ЭТЯ	DOLLAR	3T7	СОГЛШИ	СОГЛШИ
Decision Item	AUTOA	AUTOA	BUDGET	BUDGET	DEPT REQ	DEPT REQ	SECNKED	SECNBED
Budget Unit	FY 2020	FY 2020	FY 2021	FY 2021	FY 2022	FY 2022	*****	*****

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FEDERAL FUNDS

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CORE DECISION ITEM

Health and Senior Services	Budget Unit	58850C
Senior and Disability Services		
Core - Senior Services Growth and Development Program Transfer	HB Section	10.820

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	t Request			FY 2022	2 Governor's	Recommendati	on
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	0	0	0	0	PSD	0	0	0	0
TRF	1	0	0	1	TRF	0	0	0	0
Total	1	0	0	1	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes bu	udgeted in House	Bill 5 except for	certain fringes b	budgeted	Note: Fringes	budgeted in Hous	e Bill 5 except	for certain fringe	es budgeted
directly to MoDO	T, Highway Patro	l, and Conserva	tion.		directly to MoD	OT, Highway Patr	rol, and Conse	rvation.	

2. CORE DESCRIPTION

TAFP SB 275 from the 2019 legislative session created the Senior Services Growth and Development Program within the Department of Health and Senior Services (DHSS). Funding for the program will be collected by Department of Commerce and Insurance, and is provided by a transfer of five percent of certain premium taxes collected by the state on January 1st each year. Funding is to be utilized solely for enhancing senior services provided by Area Agencies on Aging (AAA) of which 50 percent must be applied to development and expansion of senior center programs, facilities, and services. DHSS will disburse the funding to the AAAs utilizing the current federally required and approved intrastate funding formula.

3. PROGRAM LISTING (list programs included in this core funding)

Older Americans Act Programs

CORE DECISION ITEM

Health and Senior Services

Senior and Disability Services

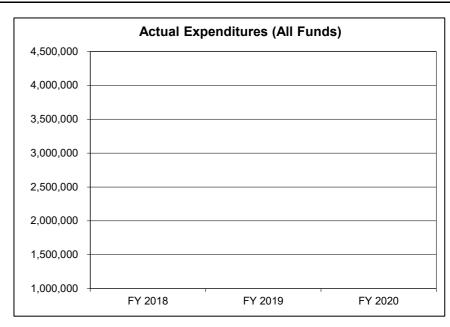
Budget Unit 58850C

Core - Senior Services Growth and Development Program Transfer

HB Section 10.820

4. FINANCIAL HISTORY

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	0	0	3,968,860	1
Less Reverted (All Funds)	0	0	0	0
Less Restricted (All Funds)*	0	0	(3,968,860)	0
Budget Authority (All Funds)	0	0	0	1
Actual Expenditures (All Funds)	0	0	0	N/A
Unexpended (All Funds)	0	0	0	N/A
Unexpended, by Fund:				
General Revenue	0	0	0	N/A
Federal	0	0	0	N/A
Other	0	0	0	N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: Senior Services Growth and Development program did not begin until FY 2020.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVING SENIOR GROWTH FUND TRANSFER

GOVERNOR'S RECOMMENDED CORE

	Total	00.0	l	0	0		ī
	TRF	00.0	l	0	0		l
DEPARTMENT CORE REQUEST							
	IstoT	00.0	l	0	0		ī
	TRF	00.0	l	0	0		l
TAFP AFTER VETOES							
	Budget Class	3T7	ЯЭ	Federal	Other	IstoT	Explanation
6. CORE RECONCILIATION DETA	ור						

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Total

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DECISION ITEM SUMMARY

00.0	0	00.0	l	00.0	l	00.0	0	FUND TRANSFERS GENERAL REVENUE
								СОКЕ
								SENIOR GROWTH FUND TRANSFER
СОГЛШИ	СОГЛШИ	ЭТЯ	ВОГГАВ	3T7	ВОГГАВ	ЭТЯ	ВОГГАК	punℲ
SECURED	SECNKED	рерт кед	рерт кед	BUDGET	BUDGET	AUTOA	AUTOA	Budget Object Summary
*******	******	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit Decision Item

ЛАТОТ ПИАЯЭ	0\$	00.0	l\$	00.0	l\$	00.0	0\$	00.0
JATOT	0	00.0	ı	00.0	ı	00.0	0	00.0
_ FAT - JATOT	0	00.0	Į į	00.0	l	00.0	0	00.0

DECISION ITEM DETAIL

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- ATOT	0	0.0	•	00.0	ı	00.0	0	00.0
TRANSFERS OUT	0	0.0 0	•	00.0	l	00.0	0	00.0
СОКЕ								
SENIOR GROWTH FUND TRANSFER								
Budget Object Class	DOLLAR	ЭТЯ	DOLLAR	ЭТЯ	DOLLAR	3T7	СОГЛШИ	СОГЛШИ
Decision Item	AUTOA	AUTOA	BUDGET	BUDGET	рерт кед	DEPT REQ	SECNEED	SECURED
Budget Unit	FY 2020	FY 2020	FY 2021	FY 2021	FY 2022	FY 2022	******	*****

A STHER F	S S	00.0 0\$	0	0\$	00.0	0\$	00.0		00.0
FEDERAL F	S	00.0 0\$	0	0\$	00.0	0\$	00.0		00.0
GENEKAL REV	3	00.0 0\$	0	l\$	00.0	1 \$	00.0		00.0
DATOT GNARD	1	00.0 0\$	0	l\$	00.0	l\$	00.0	0\$	00.0
FAT - JATOT		00.0 0	0	ı	00.0	ı	00.0	0	00.0
TUO SAERANAT		00.0			00.0		00.0	0	00.0
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CORE DECISION ITEM

Health and Senior Services	Budget Unit	58849C
Senior and Disability Services		
Core - Area Agencies on Aging	HB Section	10.825

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 202	2 Governor's I	Recommendat	tion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	4,250	12,750	0	17,000	EE	0	0	0	0
PSD	11,951,470	34,487,250	62,959	46,501,679	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	11,955,720	34,500,000	62,959	46,518,679	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes bu	udgeted in House	Bill 5 except for	certain fringes	s budgeted	Note: Fringes	budgeted in Hous	e Bill 5 except	for certain fring	es budgeted

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

Federal Funds: Department of Health and Senior Services Federal (0143) and Department of Health and Senior Services Federal Stimulus (2350). Other Funds: Elderly Home Delivered Meals Trust (0296) and Senior Services Growth and Development Program (0419).

2. CORE DESCRIPTION

This core decision item funds services and programs for seniors administered via contracts with the ten Area Agencies on Aging (AAAs). Federal Older Americans Act (OAA) funded grants pass through the Department of Health and Senior Services to the AAAs to provide senior programs including congregate and homedelivered meals, and to help prevent unnecessary or premature long-term care facility placement.

Acting as the designated state unit on aging, the Division of Senior and Disability Services (DSDS) has the responsibility of monitoring AAA compliance with OAA mandates, as well as providing technical assistance to enhance program operations. The AAAs and DSDS maintain a close working relationship throughout the state to foster the information-sharing necessary to sustain a coordinated network of aging services.

DSDS allocates Older Americans Act - Title III funds to the ten AAAs using a federally approved intrastate funding formula based on mandated criteria and information about the demographics of Missourians age 60 and over. Community funds, grants, and contributions are also utilized. Additionally, persons receiving services are invited to voluntarily and confidentially contribute toward the cost of the service.

3. PROGRAM LISTING (list programs included in this core funding)

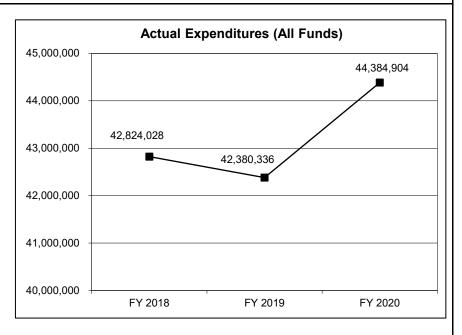
Older Americans Act Programs

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58849C
Senior and Disability Services		
Core - Area Agencies on Aging	HB Section	10.825
		

4. FINANCIAL HISTORY

_	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	46,368,678	46,368,678	85,487,538	79,518,679
Less Reverted (All Funds)	(354,172)	(354,171)	(358,671)	(214,103)
Less Restricted (All Funds)*	0	0	0	(4,818,959)
Budget Authority (All Funds)	46,014,506	46,014,507	85,128,867	74,485,617
Actual Expenditures (All Funds)	42,824,028	42,380,336	44,384,904	N/A
Unexpended (All Funds)	3,190,478	3,634,171	40,743,963	N/A
Unexpended, by Fund: General Revenue Federal Other	4 3,190,474 0	5 3,627,210 6,956	1 36,750,144 24,958	N/A N/A N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

^{*}Current Year restricted amount is as of 7/01/2020.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVING AAA CONTRACTS

	29,769,346	ŀ	27,544,641	2,224,704	00.0	Total		
	29,752,346	l	168,153,72	2,220,454	00.0	PD		
	1۲,000	0	12,750	4,250	00.0	33		
						ORE	OWWENDED C	СОУЕРИОР'S REC
	29,769,346	ı	149 ' 449'47	2,224,704	00.0	Total		
	29,752,346	l	168,153,72	2,220,454	00.0	ЬD		
	1۲,000	0	12,750	4,250	00.0	33		
							TEBUDEST	DEPARTMENT COR
	(33,000,000)	0	(33,000,000)	0	00.0	SEONAH	O TNEMTAA	NET DE
planned expenditures.								
Internal reallocations based on	120,000	0	0	120,000	00.0	ВD	278 2666	Core Reallocation
planned expenditures.								
Internal reallocations based on	(150,000)	0	0	(150,000)	00.0	33	278 2666	Core Reallocation
NDI - AAA Meals and Services.	((()		(
One-time expenditure for FY 2021		0	(000,000,81)	0	00.0	ЬD	251 6743	a∋rufibnəqx∃ x1
MDI - AAA Meals and Services.		•	(000(000(0))		00:0	- .	7010 107	oo insunii ody = vi
One-time expenditure for FY 2021	(000 000 91)	0	(15,000,000)	0	00.0	ΠΑ	7019 197	1x Expenditures
						SIN	AMT2III.GA 3	DEPARTMENT COR
	946,946	ı	149°44°641	2,224,704	00.0	Total		
	62,602,346	l	168,155,06	7,070,454	00.0	DD		
	900,761	0	12,750	124,250	0.00	33		
							ES	OTAV ABTAA 94AT
zplanation	Total	Other	Federal	В	ЭТЭ	Class		
						Budget		
							AT30 NOITAL	2. CORE RECONCIL

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVIN

Total	00.0	910,1£7,6	6926,359	826'79	₹85,647,81
	00.0	910,157,6	696,336,9	826,28	16,749,333
COKE					
IstoT	00.0	910,157,6	696,359	896'79	865,947,313
	00.0	910,157,6	696,336,9	826,28	16,749,333
IstoT	00.0	910,157,6	696,359	856,28	16,749,333
DD	00.0	910,167,6	6926,336,9	826,28	£££,647,81
Budget Sasl	3T7	ВЭ	Federal	Other	IstoT
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DECISION ITEM SUMMARY

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EX 2022

DEPT REQ

LA 2022

BUDGET

FY 2021

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BUDGET

FY 2021

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EX 2020

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FY 2020

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Budget Object Summary

Decision Item

Budget Unit

DECISION ITEM SUMMARY

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DEPT REQ

EX 2022

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EX 2022

BUDGET

FY 2021

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								PROGRAM-SPECIFIC
								СОВЕ
								MEALS WHEELS
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BUDGET

FY 2021

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FY 2020

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Budget Object Summary

Decision Item

Budget Unit

FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58850C and 582420 BUDGET UNIT NAME: Division of Senior and I		DEPARTMENT: Department of Health and Senior Services			
HOUSE BILL SECTION: 10.825		DIVISION: Division	of Senior and Disability Services		
	nd explain why the flexibi	lity is needed. If fle	expense and equipment flexibility you are exibility is being requested among divisions, and explain why the flexibility is needed.		
	DEPARTME	NT REQUEST			
The department requests continuation of ten percent	t (10%) flexibility between Hom	e and Community Ser	vices and meal services granted by the legislature in FY 2021.		
Estimate how much flexibility will be use Year Budget? Please specify the amount.	d for the budget year. How	w much flexibility v	was used in the Prior Year Budget and the Current		
	CURRENT Y	EAR	BUDGET REQUEST		
PRIOR YEAR	ESTIMATED AMO	OUNT OF	ESTIMATED AMOUNT OF		
ACTUAL AMOUNT OF FLEXIBILITY USED	FLEXIBILITY THAT W	ILL BE USED	FLEXIBILITY THAT WILL BE USED		
			Expenditures will differ annually based on needs to cover operational expenses, address emergency and changing situations, etc. In addition, the level of governor's reserve, restrictions, and core reductions impact how the flexibility will be used, if at all. The department's requested flex will allow the department to utilize available resources in the most effective manner as the need arises. The department cannot predict how much flexibility will be utilized.		
3. Please explain how flexibility was used in the	prior and/or current years.				
PRIOR YEAR EXPLAIN ACTUAL US	i E	CURRENT YEAR EXPLAIN PLANNED USE			
Not applicable.		Not applicable.			

DECISION ITEM DETAIL

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00.0	0	00.0	29,752,346	00.0	946,208,346	00.0	30,484,503	PROGRAM DISTRIBUTIONS
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00.0	0	00.0	0	00.0	150,000	00.0	0	MISCELLANEOUS EXPENSES
00.0	0	00.0	000,۲۱	00.0	000,۲۱	00.0	14,500	PROFESSIONAL SERVICES
								СОКЕ
								STOARTNOO AAA
СОГЛИИ	СОГЛШИ	ЭТЯ	DOLLAR	ЭТЯ	DOLLAR	ЭТЭ	DOLLAR	Budget Object Class
SECURED	SECNEED	рерт кед	рерт кед	BUDGET	BUDGET	AUTOA	AUTOA	Decision Item
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DECISION ITEM DETAIL

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00.0	0\$	00.0	£££'6 7 7'91\$	00.0	£££,647,81\$	00.0	106,388,51\$	DATOT GRAND
00.0	0	00.0	£££,647,81	00.0	16,749,333	00.0	13,885,901	Q9 - JATOT
00.0	0	00.0	£££,647,81	00.0	16,749,333	00.0	13,885,901	PROGRAM DISTRIBUTIONS
								СОВЕ
								MEALS WHEELS
СОГЛИИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	ЭТЯ	ВОГГАВ	Budget Object Class
SECURED	SECURED	рерт кед	рерт кед	BUDGET	BUDGET	AUTOA	AUTOA	Decision Item
*******	**********	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit

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Department of Health and Senior Services

Older Americans Act Services

Program is found in the following core budget(s):

AAA Contracts

DSDS Program
Operations

TOTAL

	<u></u>	(-)	
	AAA Contracts	DSDS Program Operations	TOTAL
GR	11,805,720	127,849	11,933,569
FEDERAL	34,500,000	311,796	34,811,796
OTHER	62,959	0	62,959
TOTAL	46,368,679	439,645	46,808,324

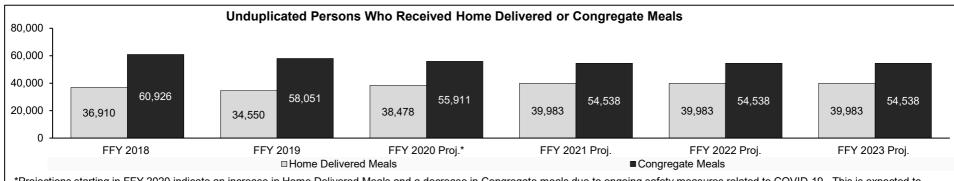
1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need.

1b. What does this program do?

- The Older Americans Act (OAA) provides supportive services and nutrition programs, through ten Area Agencies on Aging to Missourians age 60 and over to help them avoid institutionalization and remain in the location of their choice for as long as they want to be there.
- Primary program funding is received from the federal government pursuant to the Older Americans Act (OAA).
- General Revenue funds are used as the required federal match and Maintenance of Effort for OAA distribution, and as a supplement to increase service availability. The minimum state match requirement varies dependent on the type of service being provided; however, 25 percent is the largest minimum match required for the OAA funds.
- Funding also includes distributions from the Elderly Home Delivered Meals Trust Fund and Social Services Block Grant.
- Additionally, SB 275 from the 2019 legislative session created the Senior Services Growth and Development Fund, which was anticipated to begin in January 2020; however, that funding was reduced to \$1 for FY 2021 due to budgetary constraints.

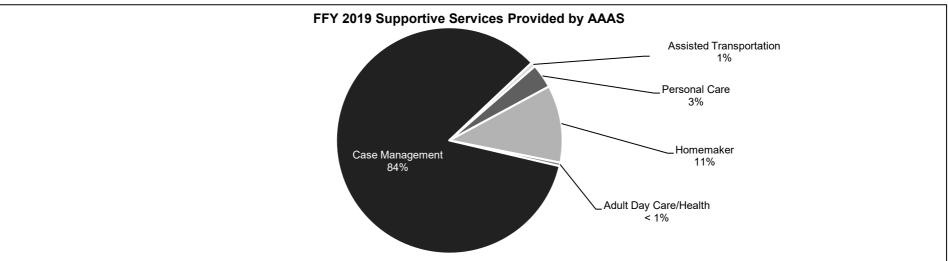
2a. Provide an activity measure(s) for the program.



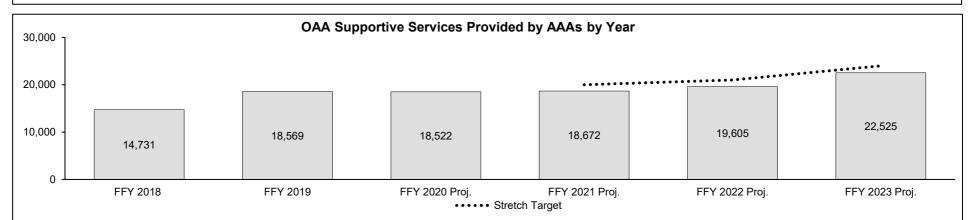
*Projections starting in FFY 2020 indicate an increase in Home Delivered Meals and a decrease in Congregate meals due to ongoing safety measures related to COVID-19. This is expected to continue into the future program years due to ongoing safety concerns with older adults due to COVID-19 and the recommendations that self-isolation continue.

Department of Health and Senior Services	HB Section(s): 10.800, 10.825
Older Americans Act Services	<u></u>
Program is found in the following core budget(s):	

2a. Provide an activity measure(s) for the program. (continued)



Supportive services, such as Personal Care, Homemaker, Adult Day Care, Case Management, and Assisted Transportation help individuals remain in their location of choice. Supportive services for FFY 2019 are identified by the percent of each service provided to Older American Act Participants across the state. FFY 2019 is the most recently completed FFY.

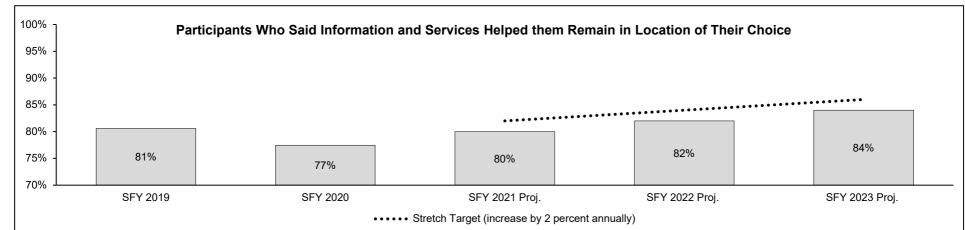


The number of total supportive services provided by the ten Area Agencies on Aging to Older Americans Act participants continues to grow year after year as the aging population increases.

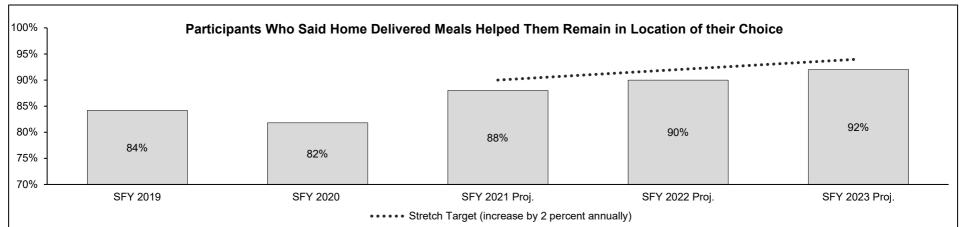
*FFY 2020 services impacted by COVID-19 as older adults were told to isolate in their homes, therefore in-home services dropped. This is expected to impact FFY 2021 also. Growth for FFY 2022 and FFY 2023 were adjusted due to this expected impact.

Department of Health and Senior Services	HB Section(s): 10.800, 10.825
Older Americans Act Services	
Program is found in the following core hudget(s):	

2b. Provide a measure(s) of the program's quality.



Based on the results of the National Core Indicator for Aging and Disability (NCI-AD) survey completed in early 2020 using a statistically valid sample of statewide recipients that utilize Older Americans Act services in Missouri. The NCI-AD is a voluntary effort by the Aging Network to measure and track it's own performance. Survey data for this population was first available for SFY 2019.



Based on the results of the National Core Indicator for Aging and Disability (NCI-AD) survey completed in early 2020 using a statistically valid sample of statewide recipients that utilize Older Americans Act services in Missouri. The NCI-AD is a voluntary effort by the Aging Network to measure and track it's own performance. Survey data for this population was first available for SFY 2019.

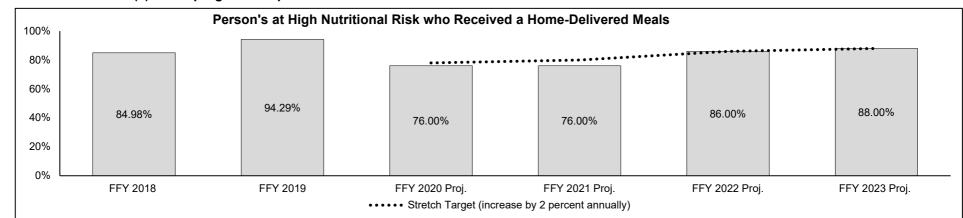
Department of Health and Senior Services

Older Americans Act Services

HB Section(s): 10.800, 10.825

Program is found in the following core budget(s):

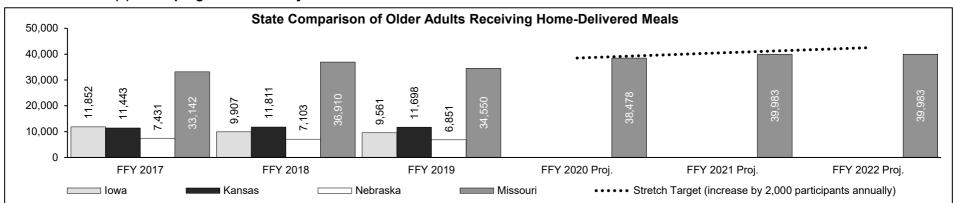
2c. Provide a measure(s) of the program's impact.



Person's determined to be at high nutritional risk via an assessment by the AAA are more likely to have higher overall healthcare costs or to be institutionalized. Receiving home-delivered meals is one way to help older homebound individuals reduce healthcare costs and remain in the home. The Older Americans Act outlines a number of risk factors outside of high nutritional risk that could also lead to Home-Delivered meals including, but not limited to, those individuals with greatest economic or social need as well as those that are home-bound and unable to attend a senior center congregate meal.

FFY 2019 was the most recently completed fiscal year. FFY 2020 projected lower due to larger population pool due to COVID-19.

2d. Provide a measure(s) of the program's efficiency.



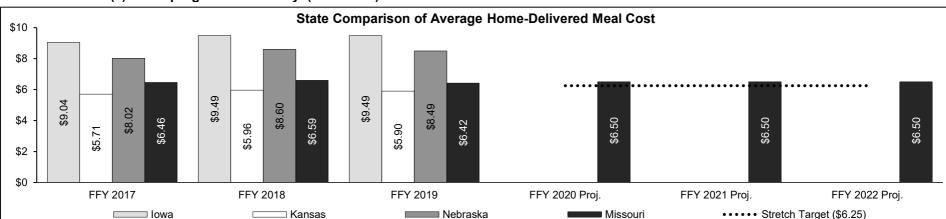
Missouri continues to provide substantially more meals than neighboring states in the Health and Human Services, Administration for Community Living, Region VII. This data is based on Federal Fiscal Years, the most recently completed Federal Fiscal Year was 2019.

Department of Health and Senior Services

Older Americans Act Services

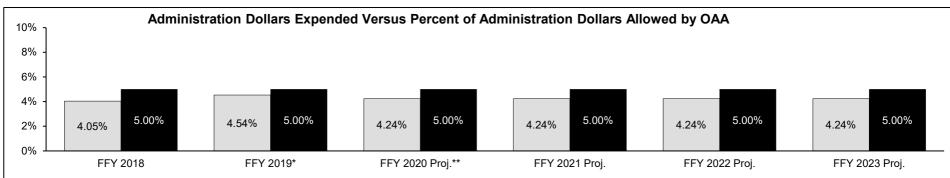
Program is found in the following core budget(s):

2d. Provide a measure(s) of the program's efficiency. (continued)



Missouri's average AAA cost to provide home-delivered meals continues to be competitive compared to neighboring states in the Health and Human Services, Administration for Community Living, Region VII. This data is based on Federal Fiscal Years, the most recently completed Federal Fiscal year was 2019.

Due to increasing cost related to COVID-19, average cost per meal is likely to rise over the next several years,



■ Administration Dollars Used as percent of Federal Award

■ Percent of Administration Dollars Allowed

HB Section(s): 10.800, 10.825

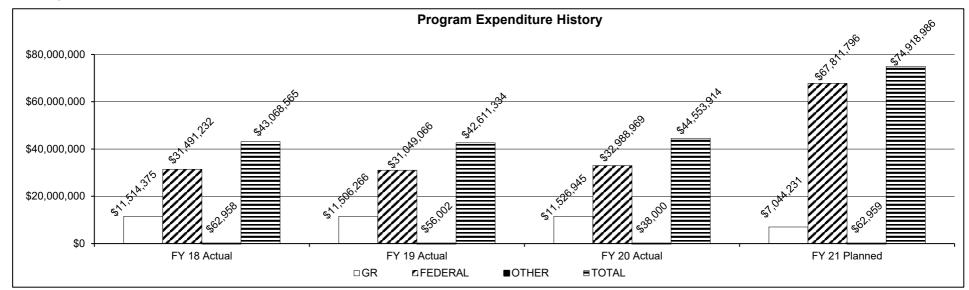
While Missouri is allowed to use up to 5 percent of the allotment from the Older Americans Act grant funds, the state has consistently been able to operate the associated programs for less. The unused administrative dollars are provided to the Area Agencies for additional programming.

*The percent of Administrative Cost for FY 2019 increased due to the introduction of a quality measures contract and for a data system improvement project requested by the Area Agencies. These overlapped with the final year of expense for procurement of audits for the Area Agencies. This expense was for FY 2019 only.

**In FFY 2020, DHSS was awarded \$19,276,127 in FFCRA and CARES Act awards. Missouri's efficient use of administrative funding from the original grant allowed DHSS to send the entirety of the additional awarded dollars directly to the AAAs, not holding any administration funding back on these awards.

Department of Health and Senior Services	HB Section(s): 10.800, 10.825
Older Americans Act Services	· · · · · · · · · · · · · · · · · · ·
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Federal funds consist of Department of Health and Senior Services Federal (0143) and Department of Health and Senior Services Federal Stimulus (2350). Other funds consist of Elderly Home Delivered Meals Trust (0296).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Chapter 192, RSMo. Federal Statutory or Regulatory Citation: Title XIX and Title XX of the Social Security Act and PL 114-144, Older Americans Reauthorization Act of 2016.

6. Are there federal matching requirements? If yes, please explain.

Yes, services funded through the Older Americans Act require matching funds. Title III administration and Title III-E family caregiver costs require a 25 percent match. Title III-B supportive program and Title III-C nutrition funding require 15 percent match of which five percent must be state match. No match is required for Title VII and the Nutrition Services Incentive Program (NSIP) funding.

7. Is this a federally mandated program? If yes, please explain.

No. However, state oversight is mandated for states accepting OAA funds.

CORE DECISION ITEM

Health and Senior Services	Budget Unit 58848C
Senior and Disability Services	
Core - Alzheimer's Grants	HB Section 10.830
	·

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 202	2 Governor's	Recommendat	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	550,000	0	0	550,000	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	550,000	0	0	550,000	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes bu	udgeted in House	Bill 5 except for	certain fringes	budgeted	Note: Fringes bud	geted in Hous	se Bill 5 except	for certain fring	es budgeted

directly to MoDOT, Highway Patrol, and Conservation.

directly to MoDOT, Highway Patrol, and Conservation.

CORE DESCRIPTION

This core funding provides reimbursement for contracted assistance programs for victims of Alzheimer's and other dementia-related diseases and their families or caregivers, including caregiver respite grants, education, caregiver safety training programs and assistive safety devices.

Alzheimer's disease is an irreversible, progressive brain disorder that slowly destroys memory and thinking skills, and eventually the ability to carry out the simplest tasks. Women age 65 and older have a one in six chance of developing the disease and men have a one in eleven chance. The risk of developing Alzheimer's doubles every five years after age 65. By 2025, the number of people age 65 and older with Alzheimer's disease is estimated to reach 7.1 million — almost a 27 percent increase from the 5.6 million affected in 2019. By 2050, the projected number grows to 13.8 million. Alzheimer's is the sixth leading cause of death in Missouri.

PROGRAM LISTING (list programs included in this core funding)

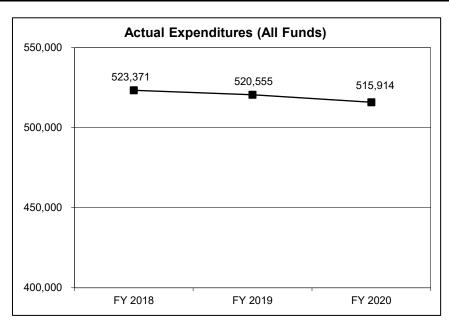
Alzheimer's Services

CORE DECISION ITEM

Health and Senior Services	Budget Unit 58848C
Senior and Disability Services	
Core - Alzheimer's Grants	HB Section 10.830

4. FINANCIAL HISTORY

_	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	550,000	550,000	550,000	550,000
Less Reverted (All Funds)	(16,500)	(16,500)	(16,500)	(16,500)
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	533,500	533,500	533,500	533,500
	523,371	520,555	515,914	N/A
Actual Expenditures (All Funds)	10,129	12,945	17,586	N/A
Unexpended (All Funds)				
Unexpended, by Fund:	10,129	12,945	17,586	N/A
General Revenue	0	0	0	N/A
Federal Other	0	0	0	N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVING ALZHEIMER'S GRANTS

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						SORE	GOVERNOR'S RECOMMENDED C
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	000'099	0	0	000'099	00.0		
							ТЕРАВТМЕИТ СОВЕ REQUEST
	220,000	0	0	000'099	00.0	Total	
	220,000	0	0	000'099	00.0	DD	
							CACTER AFTER VETOES
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						ור	5. CORE RECONCILIATION DETAI

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DECISION ITEM SUMMARY

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00.0	0	00.0	000'099	00.0	000'099	00.0	\$16'919	GENERAL REVENUE CORE PROGRAM-SPECIFIC GENERAL REVENUE
COFUMN SECURED	СОГЛШИ	DEPT REQ FTE	рерт кед Воггая	BUDGET FTE	BUDGET DOLLAR	JAUTDA ETT	AUTOA AAJJOG	Budget Object Summary
*********	*********	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit Decision Item Pudget Object Summany

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00.0	0	00.0	000'099	00.0	220,000	00.0	716 '919	Q9 - JATOT
00.0	0	00.0	000'099	00.0	000'099	00.0	716'919	PROGRAM DISTRIBUTIONS
								СОКЕ
								ALZHEIMER'S GRANTS
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	Budget Object Class
SECURED	SECURED	рерт кед	рерт кед	BUDGET	BUDGET	AUTDA	AUTDA	Decision Item
******	******	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit

Page 65 of 81 - dietaili - mi-dietail

Department of Health and Senior Services 10.830 HB Section(s): Alzheimer's Services Program is found in the following core budget(s): **Alzheimer's Services** TOTAL GR 550.000 550.000 **FEDERAL** 0 0 OTHER **TOTAL** 550,000 550,000

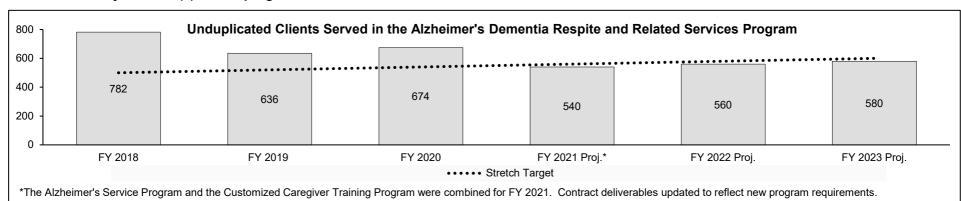
1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need.

1b. What does this program do?

- The Alzheimer's Dementia Respite and Related Services program offers assessment, care coordination, referrals, and respite care to provide relief for caregivers.
- The In-Home Caregiver Training program offers assessment, care coordination, referrals, safety equipment, and training for caregivers.
- The ultimate goal of these programs is to support efforts to decrease premature institutionalization of individuals diagnosed with Alzheimer's disease and other related dementias, and reduce caregiver stress through either respite for the caregiver or in-home caregiver training for the caregiver.
- The Alzheimer's Association estimates the number of Missourians 65 and older with Alzheimer's was 110,000 in 2018. This estimate has increased to 120,000 for 2020 and is expected to grow to 130,000 by 2025. This estimated growth shows an 18.2 percent increase from 2018 to 2025. Source: https://www.alz.org/getmedia/8987e62a-ee49-4f54-8374-523e18f77494/statesheet_missouri

2a. Provide an activity measure(s) for the program.



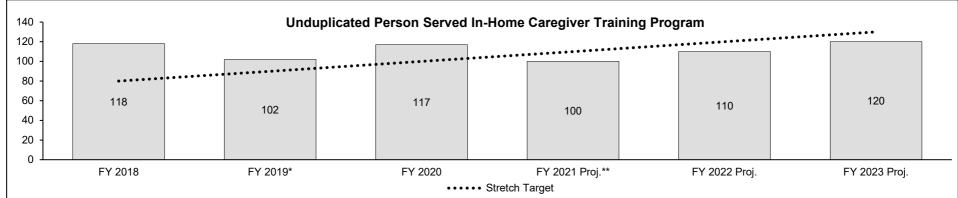
Department of Health and Senior Services

Alzheimer's Services

Program is found in the following core budget(s):

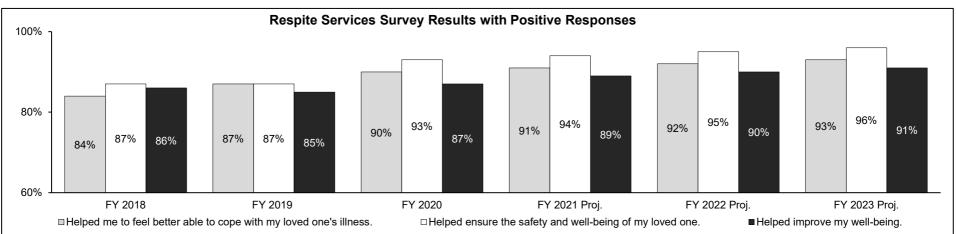
HB Section(s): 10.830

2a. Provide an activity measure(s) for the program. (continued)



*FY 2019 program changes created a six month delay in the program start date.

2b. Provide a measure(s) of the program's quality.

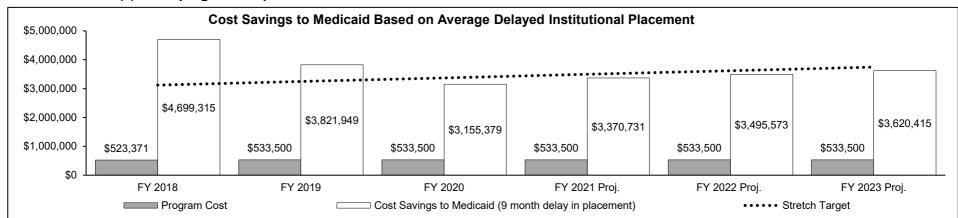


The Alzheimer's Association surveyed caregivers to determine if the respite services received helped reduce caregiver stress, ensure the safety and well-being of their loved one, and improved their own well-being. Positive responses to each question are in the chart above.

^{**}The Alzheimer's Service Program and the Customized Caregiver Training Program were combined for FY 2021. Contract deliverables updated to reflect new program requirements.

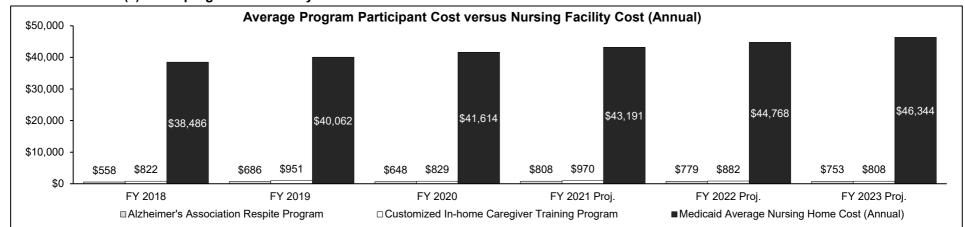
Department of Health and Senior Services	HB Section(s):10.830
Alzheimer's Services	· · · · · · · · · · · · · · · · · · ·
Program is found in the following core budget(s):	

2c. Provide a measure(s) of the program's impact.



Of those caregivers who stated that the program helped them delay placement of their loved one, the average delay was at least nine months. The average monthly Missouri cost of a nursing home is \$3,467.83. The average Medicaid cost savings is based on 9 months of nursing home care. Some participants may not be Medicaid eligible at first, but could quickly become Medicaid eligible due to cost of Alzheimer's units in nursing facilities.

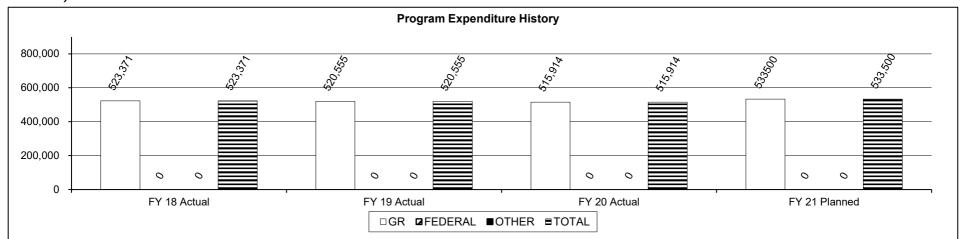
2d. Provide a measure(s) of the program's efficiency.



The average annual per participant cost to provide in-home caregiver training and respite services is substantially less than the amount it would cost if the participant was placed in a long-term care facility. Some participants may not be Medicaid eligible at first, but could quickly become Medicaid eligible due to cost of Alzheimer's units in nursing facilities.

Department of Health and Senior Services	HB Section(s): 10.830
Alzheimer's Services	
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Not applicable.

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 192.2100 to 192.2110, RSMo.

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

No.

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58856C
Senior and Disability Services		<u> </u>
Naturally Occurring Retirement Communities	HB Section	10.831
4 CORE FINANCIAL CUMMARY		

11. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 2022 Governor's Recommendation			
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	400,000	0	0	400,000	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	400,000	0	0	400,000	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes but	dgeted in House	Bill 5 except for	certain fringes	budgeted	Note: Fringes	budgeted in Hou	se Bill 5 except	for certain fring	es budgeted
diamental to Manager	T				" " 1	OT 11'-1			

directly to MoDOT, Highway Patrol, and Conservation.

directly to MoDOT, Highway Patrol, and Conservation.

CORE DESCRIPTION

This core funds the Naturally Occurring Retirement Community (NORC) Programs, which establish programs, supports, and services within three local communities that allow seniors in the designated geographic areas to remain in the community rather than entering a long-term care facility. These programs support the healthy aging of older adults through increased community involvement and easy access to services that include transportation; socialization and education; assistance with household maintenance; healthcare; and volunteer opportunities.

The NORC model promotes healthy aging, independence, and community building for adults 60 years of age and older in a designated service area through a multifaceted approach. The key elements consist of case management and social work services; health care management and prevention programs; education, socialization, and recreational activities; and volunteer opportunities for the community to assist members of the NORC with household tasks. NORC allows aging in place with greater dignity, independence, and quality of life.

PROGRAM LISTING (list programs included in this core funding)

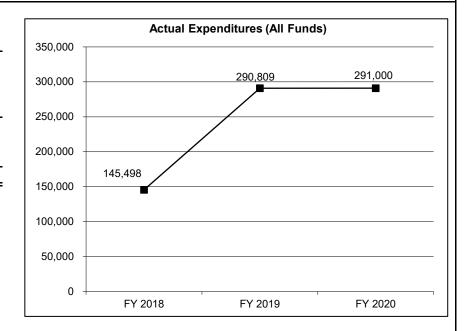
Naturally Occurring Retirement Communities

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58856C
Senior and Disability Services	_	·
Naturally Occurring Retirement Communities	HB Section	10.831

4. FINANCIAL HISTORY

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
	450.000	000 000	000 000	400.000
Appropriation (All Funds)	150,000	300,000	300,000	400,000
Less Reverted (All Funds)	(4,500)	(9,000)	(9,000)	(9,000)
Less Restricted (All Funds)*	0	0	0	(100,000)
Budget Authority (All Funds)	145,500	291,000	291,000	291,000
Actual Expenditures (All Funds)	145,498	290,809	291,000	N/A
Unexpended (All Funds)	2	191	0	N/A
Unexpended, by Fund:	_			
General Revenue	2	191	0	N/A
Federal	0	0	0	N/A
Other	0	0	0	N/A



Reverted includes the statutory three percent reserve amount (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

^{*}Current Year restricted amount is as of 7/01/2020.

DEPARTMENT OF HEALTH & SENIOR SERVINORC GRANTS

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DECISION ITEM SUMMARY

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СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	ЭТЯ	DOLLAR	Budget Object Class
SECURED	SECNEED	DEPT REQ	рерт кед	BUDGET	BUDGET	AUTOA	AUTOA	Decision Item
******	******	上人 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit

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Department of Health and Senior Services

Naturally Occurring Retirement Communities (NORC)

Program is found in the following core budget(s):

NORC

TOTAL

	NORC				TOTAL
GR	400,000				400,000
FEDERAL	0				0
OTHER	0				0
TOTAL	400,000				400,000

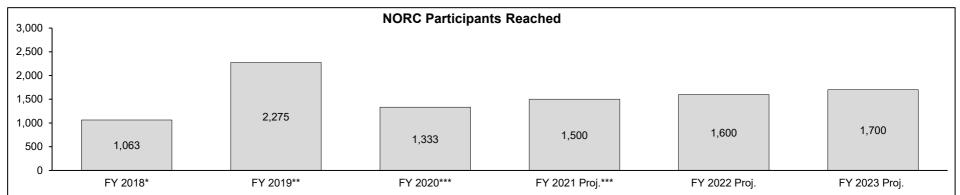
1a. What strategic priority does this program address?

Enhance access to care.

1b. What does this program do?

The goal of the program is to improve the health and safety of Missourians age 60 and over in three Naturally Occurring Retirement Communities (NORC) within the state: Jewish Federation of St. Louis in Creve Coeur; A Caring Plus Foundation in Jennings; and Palestine Senior Center in Kansas City. The service area boundary for the Jewish Federation, a three mile radius of the Jewish Community Center Campus, was determined in their original federal grant from the Administration on Aging. The boundaries for A Caring Plus Foundation and the Palestine Senior Center are defined as a two-mile radius from each center's location. The NORC program provides support to older adults living in urban areas with a population of seniors who have insufficient resources to age independently in their own homes.

2a. Provide an activity measure(s) for the program.



^{*}The FY 2018 appropriation was reduced to the amount of the expenditure restriction of FY 2017.

^{**}In FY 2019, funding was fully restored to the FY 2016 level.

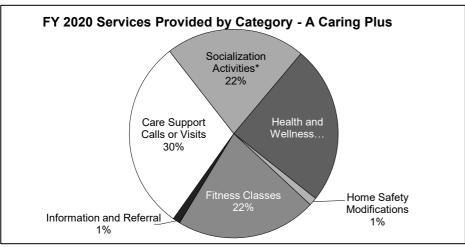
^{***}NORC participation in FY 2020 affected by COVID-19 Pandemic, FY 2021 NORC participation predicted to be affected by COVID-19 Pandemic as participation relies on community interaction.

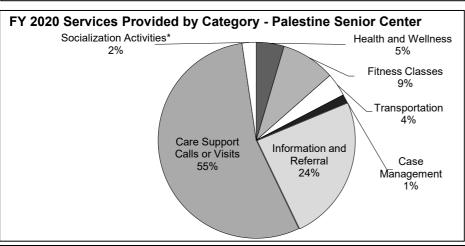
Department of Health and Senior Services	HB Section(s): 10.831
Naturally Occurring Retirement Communities (NORC)	
Program is found in the following core budget(s):	

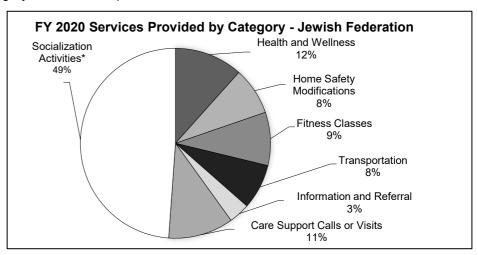
2b. Provide a measure(s) of the program's quality.

Each Naturally Occurring Retirement Community (NORC) provides the specific services needed to meet the individual needs of the eligible populations in their designated geographical areas.

The most utilized services provided by each NORC in FY 2020 are listed by category in the three separate charts.







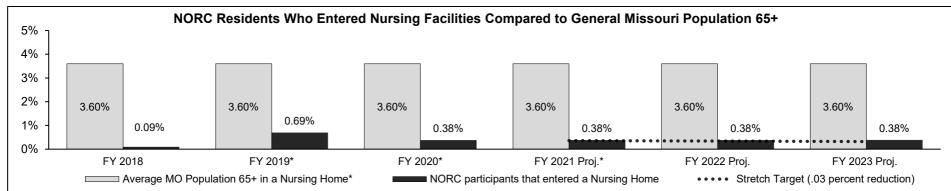
*Socialization activities include book clubs, outings to events, movie nights, themed dinner nights, grandparent events, and other activities to provide opportunities for the older adults to be actively involved with others in their communities.

Department of Health and Senior Services

Naturally Occurring Retirement Communities (NORC)

Program is found in the following core budget(s):

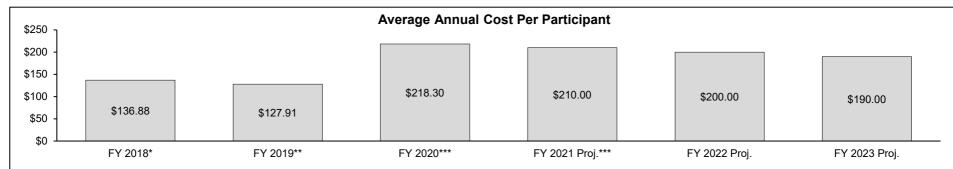
2c. Provide a measure(s) of the program's impact.



Participants in the program are provided supportive services to keep them in the environment of their choice, which is substantially less than the cost of a nursing facility. Participants in the program are able to remain in their homes at a significantly higher rate than the general population in Missouri.

*Average percentage of Missouri population 65+ residing in a nursing home data retrieved from Centers for Medicare and Medicaid Nursing Home Data Compendium publication.

2d. Provide a measure(s) of the program's efficiency.



The program provides services to participants at a cost much less than the average nursing facility cost while helping keep participants in their home. The average nursing facility cost per participant per year is \$41,614.

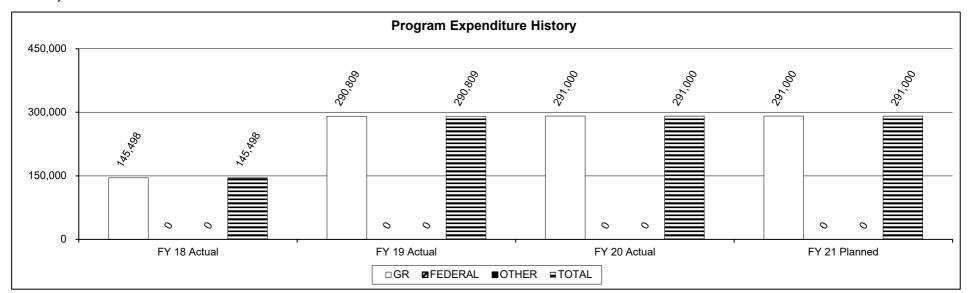
^{*}The FY 2018 appropriation was reduced to the amount of the expenditure restriction of FY 2017.

^{**}In FY 2019, funding was fully restored to the FY 2016 level. In FY 2019, the boundaries of the three NORCs were increased due to an additional population already residing near the previous boundaries who otherwise met the qualifications to participate in the NORC outside of the designated boundaries. This allowed for additional participants to be eligible to enroll in the existing NORCs.

^{***}NORC enrollment in FY 2020 affected by COVID-19 Pandemic, thus making the cost per participant increase. FY 2021 NORC enrollment predicted to be affected by COVID-19 pandemic as enrollment relies on community interaction.

Department of Health and Senior Services	HB Section(s): 10.831
Naturally Occurring Retirement Communities (NORC)	
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Not applicable.

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Not applicable.

Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

No.

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58846C
Senior and Disability Services		
Core - Naturalization Assistance	HB Section	10.835

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 202	2 Governor's	Recommendat	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	200,000	0	0	200,000	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	200,000	0	0	200,000	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes bu	dgeted in House	Bill 5 except for	certain fringes	budgeted	Note: Fringes b	udgeted in Hous	se Bill 5 except	for certain fring	es budgeted
directly to MaDO	T Highway Datra	I and Canaania	tion		directly to MaDC	T Highway Dat	ral and Canaa	niction	_

directly to MoDOT, Highway Patrol, and Conservation.

directly to MoDOT, Highway Patrol, and Conservation.

CORE DESCRIPTION

The requested core funding is used to assist frail senior immigrants and refugees who have lawfully resided in Missouri for at least five years and who are not able to complete the normal naturalization process due to health barriers to complete the naturalization process. Becoming a citizen allows these individuals to obtain federal benefits they would not otherwise qualify for after their initial 84-month eligibility period in the United States. These federal benefits, such as Medicare and Supplemental Security Income, relieve the financial obligation to state resources such as Medicaid.

PROGRAM LISTING (list programs included in this core funding)

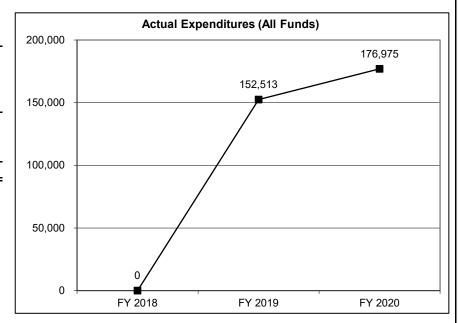
Naturalization Assistance

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58846C
Senior and Disability Services		
Core - Naturalization Assistance	HB Section	10.835
		

4. FINANCIAL HISTORY

_	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	0	200,000	200,000	200,000
Less Reverted (All Funds)	0	(6,000)	(6,000)	(3,000)
Less Restricted (All Funds)*	0	0	0,000)	(100,000)
Budget Authority (All Funds)	0	194,000	194,000	97,000
Actual Expenditures (All Funds)	0	152,513	176,975	N/A
Unexpended (All Funds)	0	41,487	17,025	N/A
Unexpended, by Fund: General Revenue	0	41,487	17,025	N/A
Federal	0	0	0	N/A
Other	0	0	0	N/A



*Current Year restricted amount is as of 7/01/2020.

Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: In FY 2018, funding for Naturalization Assistance was not appropriated.

DEPARTMENT OF HEALTH & SENIOR SERVINATURALIZATION ASSISTANCE

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TURALIZATION ASSISTANCE								
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dget Unit ecision Item	FY 2020	FY 2020	FY 2021	FY 2021	FY 2022	FY 2022	*******	*****

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								СОВЕ
								NATURALIZATION ASSISTANCE
СОГЛИИ	СОГЛШИ	3T4	DOLLAR	3T4	DOLLAR	ЭТЭ	DOLLAR	Budget Object Class
SECURED	SECURED	рерт кед	рерт кед	BUDGET	BUDGET	AUTOA	AUTOA	Decision Item
******	******	FY 2022	FY 2022	FY 2021	FY 2021	E A 5050	FY 2020	Budget Unit

Page 67 of 81 Page 67 of 81 Page 68 of 81

Department of Health and Senior Services HB Section(s): 10.835 **Naturalization Assistance** Program is found in the following core budget(s): Naturalization **Assistance TOTAL** GR 200,000 200.000 **FEDERAL** 0 **OTHER TOTAL** 200.000 200,000

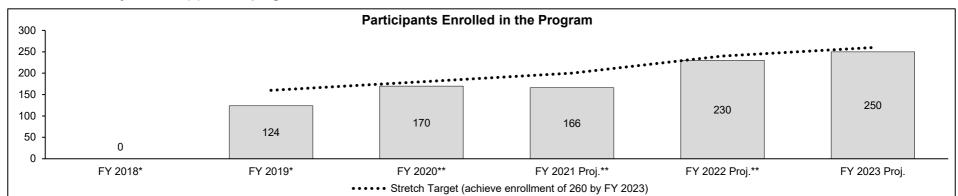
1a. What strategic priority does this program address?

Enhance access to care.

1b. What does this program do?

This program is currently delivered through a contract with Bilingual International Assistance Services to provide assistance completing the naturalization process to frail senior immigrants and refugees throughout Missouri who have lawfully resided in Missouri for at least five years and who are not able to complete the normal naturalization process due to health barriers. Becoming a citizen allows these individuals to obtain federal benefits they would not otherwise qualify for after their initial 84-month eligibility period in the United States. These federal benefits, such as Medicare and Supplemental Security Income, relieve the financial obligation to state resources such as Medicaid.

2a. Provide an activity measure(s) for the program.



*No funding was provided in FY 2018. Funding fully restored in FY 2019, but there were no participants to roll over from the prior year. Due to the length of the citizenship process, participants can be enrolled for more than one program year.

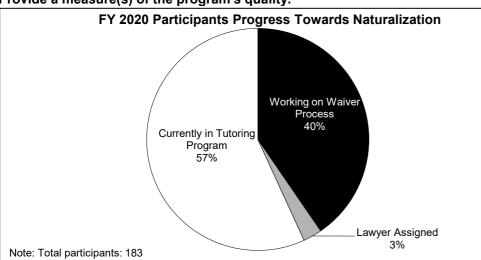
^{**}COVID-19 affected enrollments in the program for FY 2020. Funding was cut in half for FY 2021 due to COVID 19 budget restrictions, therefore contracted enrollment was cut in half. This will also affect the rollover available for FY 2022.

Department of Health and Senior Services

Naturalization Assistance

Program is found in the following core budget(s):

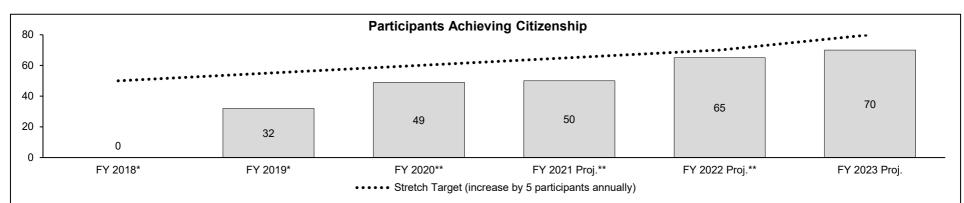
2b. Provide a measure(s) of the program's quality.



The goal of the Naturalization Program is to help individuals achieve their United States citizenship. The average length of time a participant stays in the program is nine months, but due to the complexity of some cases, individuals can be in the program for more than one year. While in the program, participants are evaluated to determine if they are able to take the citizenship test in English. If the participant is cognitively capable, they are put into the Tutoring Program where they learn English and work on the guestions on the test. If they are not able to learn English due to their cognitive state; they are assisted in applying for a waiver, which allows them to take the test in their own language. In some rare cases, due to a person's health or reduced cognitive state they are not able to take the citizenship test and a lawyer is hired to assist them in becoming naturalized. Participants can be moved from tutoring to waiver or lawyer if it is determined during the process that additional assistance is needed due to declining health or cognitive status.

10.835

HB Section(s):



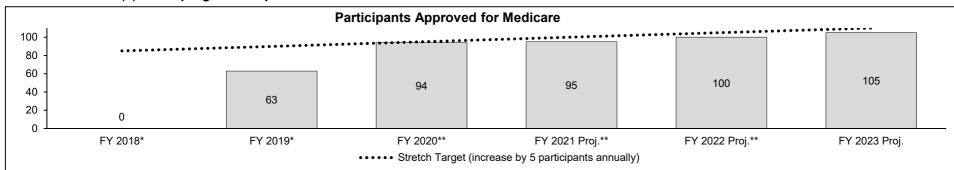
Due to the length of time it takes to complete the process of naturalization, about 20 to 25 percent of the participants complete the program during the year they enrolled; therefore, this measure could be incorporating participants from prior years. Noteworthy is that the majority of participants will complete citizenship in year two.

*No funding was provided in FY 2018. Funding fully restored in FY 2019, but there were no participants to roll over from the prior year. Due to the length of the citizenship process, participants can be enrolled for more than one program year.

**COVID-19 affected enrollments in the program for FY 2020. Funding was cut in half for FY 2021 due to COVID-19 budget restrictions, therefore contracted enrollment was cut in half. This will also affect the rollover available for FY 2022.

Department of Health and Senior Services	HB Section(s): 10.835
Naturalization Assistance	· · · · · · · · · · · · · · · · · · ·
Program is found in the following core budget(s):	

2c. Provide a measure(s) of the program's impact.

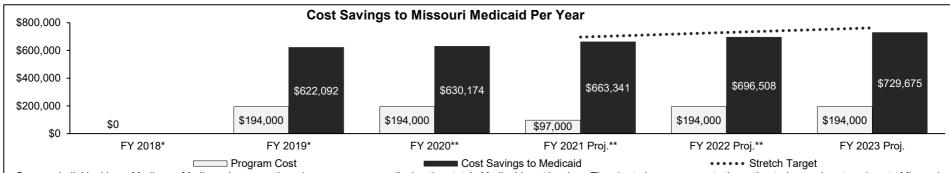


By becoming United States citizens, refugee/asylee participants can apply for Medicare, which offsets the cost of healthcare for these individuals for the State of Missouri. Legal Permanent Residents (Green Card Holders) are eligible for Medicare after five years; this program also helps them with the application process for Medicare, so some become eligible for Medicare before they become U.S. Citizens.

*No funding was provided in FY 2018. Funding fully restored in FY 2019, but there were no participants to roll over from the prior year. Due to the length of the citizenship process, participants can be enrolled for more than one program year.

**COVID-19 affected enrollments in the program for FY 2020. Funding was cut in half for FY 2021 due to COVID-19 budget restrictions, therefore contracted enrollment was cut in half. This will also affect the rollover available for FY 2022.

2d. Provide a measure(s) of the program's efficiency.



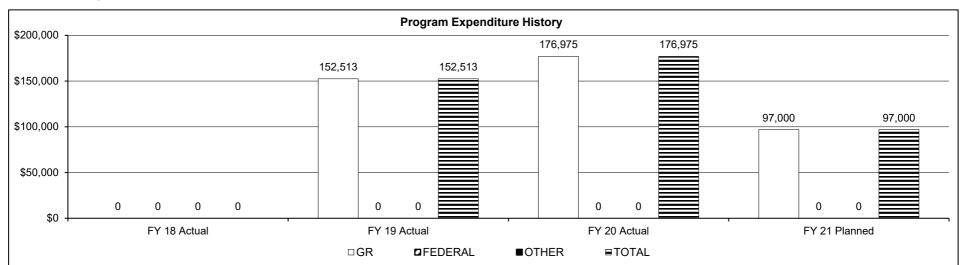
Once an individual is on Medicare, Medicare becomes the primary pay source relieving the state's Medicaid cost burden. The chart above represents the estimated annual cost savings to Missouri once an individual is approved for Medicare and Medicaid becomes the secondary payer. This savings would continue for each year the individual continues to live in Missouri.

*No funding was provided in FY 2018. Funding fully restored in FY 2019, but there were no participants to roll over from the prior year. Due to the length of the citizenship process, participants can be enrolled for more than one program year.

**COVID-19 affected enrollments in the program for FY 2020. Funding was cut in half for FY 2021 due to COVID-19 budget restrictions, therefore contracted enrollment was cut in half. This will also affect the rollover available for FY 2022.

Department of Health and Senior Services	HB Section(s): 10.835
Naturalization Assistance	
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other" funds?

Not applicable.

- 5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

 Not applicable.
- 6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

No.

Division of Regulation & Licensure

CORE DECISION ITEM

Health and Senior Services	Budget Unit 58858C
Regulation and Licensure	
Core - Regulation and Licensure Program Operations	HB Section 10.900

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 202	2 Governor's	Recommendati	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	9,030,799	13,218,274	1,086,271	23,335,344	PS	0	0	0	0
EE	945,682	1,801,337	633,908	3,380,927	EE	0	0	0	0
PSD	1,750	484,754	2,188,004	2,674,508	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	9,978,231	15,504,365	3,908,183	29,390,779	Total	0	0	0	0
FTE	183.12	254.34	23.00	460.46	FTE	0.00	0.00	0.00	0.00
Est. Fringe	5,563,470	7,950,861	682,877	14,197,208	Est. Fringe	0	0	0	0
Note: Fringes by	udaeted in House	Bill 5 except for	r certain fringe:	s budgeted	Note: Fringes b	udaeted in Hous	se Bill 5 except	for certain fring	es budgeted

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

Fedral Funds: Department of Health and Senior Services Federal (0143) and Department of Health and Senior Services Federal Stimulus (2350).

Other Funds: Nursing Facility Federal Reimbursement Allowance (0196), Nursing Facility Quality of Care (0271), Health Access Incentive (0276), and Mammography (0293).

2. CORE DESCRIPTION

The Division of Regulation and Licensure (DRL) is composed of the Director's Office, Section for Long Term Care Regulation, Section for Health Standards and Licensure, Section for Child Care Regulation, Family Care Safety Registry, and the Board of Nursing Home Administrators. These licensing (and certification for Medicare and Medicaid) programs include long-term care facilities (residential care facilities, assisted living facilities, intermediate care facilities, and skilled nursing facilities), adult day care providers, hospitals, ambulatory surgical centers, clinical laboratory services, mammography services, end stage renal dialysis centers, rural health clinics, home health agencies, hospices, outpatient physical therapy providers, comprehensive outpatient rehabilitation facilities, emergency medical technicians (basic, intermediate, and paramedic), air and ground ambulance services, trauma centers, stroke centers, ST-segment elevation myocardial infarction (STEMI) centers, and child care facilities. Further, the division registers persons and businesses that manufacture, distribute, prescribe, or dispense controlled substances. The Family Care Safety Registry provides background screening results for employees in the child care and elder care industries. The Board of Nursing Home Administrators test and license nursing home administrators. The Missouri Health Facilities Review Committee administers the Certificate of Need Program to achieve the highest level of health care for Missourians through cost containment, reasonable access, and public accountability. The mission of the Committee is fulfilled by reviewing applicable health care service proposals while taking into consideration community need.

Division staff support complaint investigation, licensure, and survey/inspection activities required under Chapters 190, 192, 195, 197, 198, 210, 344, and 660, RSMo; various sections of 21 CFR and 42 CFR; the Mammography Quality Standards Act; the Clinical Laboratory Improvement Amendments; the Social Security Act (Medicare and Medicaid), and conditions of participation in the Medicare 1864 agreement with the Centers for Medicare and Medicaid Services.

CORE DECISION ITEM

Health and Senior Services	Budget Unit 58858C
Regulation and Licensure	
Core - Regulation and Licensure Program Operations	HB Section 10.900

3. PROGRAM LISTING (list programs included in this core funding)

Board of Nursing Home Administrators Hospital Standards
Emergency Medical Services Long Term Care

Family Care Safety Registry

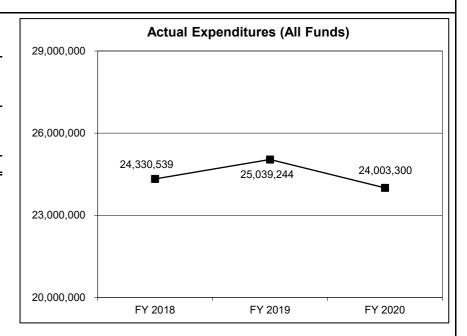
Narcotics and Dangerous Drugs

Health Standards and Licensure Regulation and Licensure Administration

4. FINANCIAL HISTORY

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	25,391,039	27,998,070	28,718,702	30,950,779
Less Reverted (All Funds)	(270,202)	(293,608)	(296,483)	(295,980)
Less Restricted (All Funds)*	0	0	0	(203,178)
Budget Authority (All Funds)	25,120,837	27,704,462	28,422,219	30,451,621
	24,330,539	25,039,244	24,003,300	N/A
Actual Expenditures (All Funds)	790,298	2,665,218	4,418,919	N/A
Unexpended (All Funds)				
Unexpended, by Fund:				
General Revenue	19,573	268,432	982,460	N/A
Federal	364,647	668,349	1,760,366	N/A
Other	406,078	1,728,437	1,676,093	N/A

^{*}Current Year restricted amount is as of 7/01/2020.



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

DIV OF REGULATION & LICENSURE

5. CORE RECONCILIATION DETAIL Budget Class FTE GR Federal Other Total Explanation TAPP AFTER VETOES

					0
30,950,779	5,468,183	12,504,365	162,876,6	97.297	IstoT
4,276,006	3,806,915	165,764	۱٬200	00.0	ЬD
3,339,429	∠66' 7 ∠9	1,818,500	842,932	00.0	33
23,335,344	1,086,11	472,812,81	667,080,6	94.394	Sd

planned expenditures.									
Internal reallocations based on		0	0	0	00.0	Sd	9921 8	181 i	Core Reallocation
planned expenditures.									
Internal reallocations based on	(0)	0	0	0	(00.0)	Sd	8 2018	181 I	Core Reallocation
planned expenditures.									
Internal reallocations based on	720	0	0	520	00.0	ВD	7 4823	.81	Core Reallocation
planned expenditures.									
Internal reallocations based on	(220)	0	0	(220)	00.0	33	7 4823	.81	Core Reallocation
planned expenditures.									
Internal reallocations based on	(0)	0	0	0	00.0	Sd	1284 7	.81	Core Reallocation
planned expenditures.									
Internal reallocations based on	(0)	0	0	0	(00.0)	Sd	4814	18i	Core Reallocation
planned expenditures.									
Internal reallocations based on	0	0	0	0	(00.0)	Sd	3 2015	:91 ·	Core Reallocation
planned expenditures.									
Internal reallocations based on	(0)	0	0	0	(00.0)	Sd	1263)9l '	Core Reallocation
planned budget realignment.									
Core reduction of FTE based on	0	0	0	0	(5.00)	Sd	9921 9	52 6	Core Reduction
NDI - COVID-19 LTC Improvements.									
One-time expenditure for FY 2021	(000,092,1)	(1,560,000)	0	0	00.0	ВD	9744 2	72	1x Expenditures
						STNE	MTSUC	ORE AD	DEPARTMENT C

DIV OF REGULATION & LICENSURE

5. CORE RECONCILIATION DETAIL

	(1,560,000)	(1,560,000)	0	0	(5.00)	SHANGES	NENT (ТЯАЧЭ О	I T3N
Internal reallocations based on planned expenditures.	(000,4)	(000,4)	0	0	00.0	ПЧ	94476	160	Core Reallocation
Internal reallocations based on planned expenditures.	77 2 ,4	772,4	0	0	00.0	ВD	4820	ا06	Core Reallocation
Internal reallocations based on planned expenditures.	(525,72)	(525,72)	0	0	00.0	DД	7017	ا160	Core Reallocation
Internal reallocations based on planned expenditures.	(38,18)	(38,18)	0	0	00.0	ВD	1221	160	Core Reallocation
Internal reallocations based on planned expenditures.	398,18	398,18	0	0	00.0	33	1221	160	Core Reallocation
Internal reallocations based on planned expenditures.	000'₺	000'₺	0	0	00.0	33	9744	06١	Core Reallocation
Internal reallocations based on planned expenditures.	(772,4)	(۲۲۵,4)	0	0	00.0	33	4820	06١	Core Reallocation
internal reallocations based on planned expenditures.	£2E,7S	£2£,72	0	0	00.0	33	7017	160	Core Reallocation
Internal reallocations based on planned expenditures.	0	0	0	0	00.0	Sd	1270	160	Core Reallocation
Internal reallocations based on planned expenditures.	(0)	0	0	0	00.0	Sd	1275	160	Core Reallocation
Internal reallocations based on planned expenditures.	£91,71	0	£91,71	0	00.0	ЪD	1569	188	Core Reallocation
Internal reallocations based on planned expenditures.	(691,71)	0	(691,71)	0	00.0	STNE	1869 1869		DEPARTMENT CO
noitsnation	l lstoT	Other	Federal	ЯЭ	3 17	Budget Class			

DIV OF REGULATION & LICENSURE

	726,385,524 729,085,5	172,880,1 809,889	472,812,E1 7EE,108,1	9,030,799 9,030,799	94.094	.08E PS EE	GOVERNOR'S RECOMMENDED C
	29,390,779	£81,80e,£	12,504,365	152,876,6	94.094	IstoT	
	2,674,508	2,188,004	<i>4</i> 84,754	09 ۲ '۱	00.0	DD	
	3,380,927	806,888	7EE,108,1	789'9 1 6	00.0	33	
	23,335,344	1,086,271	472,812,81	667,080,6	94.094	Sd	
							DEPARTMENT CORE REQUEST
noitsnation	3 lstoT	Other	Federal	СВ	3T4	Budget Class	
						ור	5. CORE RECONCILIATION DETAI

12,504,365

79Z'787

162,876,6

1,750

94.094

00.0

Total

ВD

29,390,779

2,674,508

3,908,183

2,188,004

DECISION ITEM SUMMARY

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DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

SECNKED

00.0	0	00.0	2,778	00.0	0	00.0	0	EXPENSE & EQUIPMENT GENERAL REVENUE
00.0	0	2.00	497,201	00.0	0	00.0	0	S9 - JATOT
00.0	0	1.26	<u> </u>	00.0	0	00.0	0	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	₽ 7.0	38,023	00.0	0	00.0	0	GENEKAL REVENUE
								PERSONAL SERVICES
								Authorized Electr Monitoring - 1580005
00.0	0	94.094	677,068,62	97.297	677,036,05	426.44	24,176,235	JATOT
00.0	0	00.0	2,674,508	00.0	900,872,4	00.0	860,643,1	Q9 - JATOT
00.0	0	00.0	772,4	00.0	0	00.0	2,181	HEALTH ACCESS INCENTIVE
00.0	0	00.0	1,486,050	00.0	3,081,915	00.0	089'046	NURSING FAC QUALITY OF CARE
00.0	0	00.0	ZZ9 [°] Z69	00.0	725,000	00.0	191,884	NURSING FACILITY FED REIM ALLW
00.0	0	00.0	300,000	00.0	300,000	00.0	0	DHSS FEDERAL STIMULUS
00.0	0	0.00	184,754	0.00	169,791	00.0	۲9۲,9۲۱	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	1,750	00.0	009'l	00.0	2,399	PROGRAM-SPECIFIC GENERAL REVENUE
00.0	0	00.0	726,086,8	00.0	3,339,429	00.0	۶٬406,974	33 - JATOT
00.0	0	00.0	011,81	00.0	011,51	00.0	ZZ6'7	YHAAAƏOMMAM
00.0	0	0.00	£69 ['] 9	00.0	076,01	00.0	514,8	HEALTH ACCESS INCENTIVE
00.0	0	00.0	287,382	0.00	Z16'099	0.00	£67,E81	NURSING FAC QUALITY OF CARE
00.0	0	00.0	525,72	00.0	0	00.0	000,61	NURSING FACILITY FED REIM ALLW
00.0	0	00.0	78E,108,1	0.00	1,818,500	00.0	728,158,1	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	00.0	289'976	00.0	845,932	00.0	1 96'899	GENERAL REVENUE
								EXPENSE & EQUIPMENT
00.0	0	94.094	23,335,344	97.394	23,335,344	426.44	20,126,223	29 - JATOT
00.0	0	37.1	269,89	27.1	269,89	90.1	879,98	YHAAAƏOMMAM
00.0	0	00.1	496 '6 4	00.1	796,67	18.1	864,97	HEALTH ACCESS INCENTIVE
00.0	0	20.25	279,769	20.25	279,789	12.12	142,582	NURSING FAC QUALITY OF CARE
00.0	0	00.0	300,000	00.0	300,000	00.0	0	DHSS FEDERAL STIMULUS
00.0	0	254.34	472,818,21	269.34	472,818,274	235.68	187,498,11	DHSS-FEDERAL AND OTHER FUNDS
00.0	0	183.12	667,080,6	183.12	667,080,6	47.371	8,032,790	GENERAL REVENUE
								PERSONAL SERVICES
								COKE
								DIV OF REGULATION & LICENSURE
СОГЛШИ	СОГЛШИ	ЭТЭ	DOLLAR	3T7	DOLLAR	ЭТЭ	DOLLAR	Pun∃

BUDGET

FY 2021

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FY 2020

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Budget Object Summary

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Budget Unit

DECISION ITEM SUMMARY

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BUDGET

FY 2021

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латот пиаяэ	\$27,176,235	426.44	644,036,06\$	97.297	160,106,62\$	462.46	0\$	00.0
JATOT	0	00.0	0	00.0	000'00 1 ⁄	00.0	0	00.0
S9 - JATOT	0	00.0	0	00.0	000,004	00.0	0	00.0
CMS CARES Act Funding - 1580006 PERSONAL SERVICES DHSS FEDERAL STIMULUS	0	00.0	0	00.0	000,004	00.0	0	00.0
JATOT	0	00.0	0	00.0	816,311	2.00	0	00.0
33 - JATOT	0	00.0	0	00.0		00.0	0	00.0
DIV OF REGULATION & LICENSURE Authorized Electr Monitoring - 1580005 EXPENSE & EQUIPMENT DHSS-FEDERAL AND OTHER FUNDS	0	00.0	0	00.0	977,01	00.0	0	00.0
Fund	DOLLAR	314	ВОГГАК	317	ВОГГАК	314	СОГЛШИ	СОГЛШИ

BUDGET

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FY 2020

Budget Object Summary

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Budget Unit

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EX 2022

BUDGET

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EX 2022

Budget Object Class	DOLLAR	ЭТЭ	DOLLAR	3T7	ВОГГАВ	3T7	СОГЛШИ	СОГЛШИ
OV OF REGULATION & LICENSURE								
ORE			, - , -	-00,	-		-	•
ADMIN OFFICE SUPPORT ASSISTANT	184,424	13.61	241,513	00.91	0	00.0	0	00.0
OFFICE SUPPORT ASSISTANT	£98'l†	13.1	976,76	3.60	0	00.0	0	00.0
SR OFFICE SUPPORT ASSISTANT	795,599	24.08	870,356	00.72	0	00.0	0	00.0
INFORMATION TECHNOLOGIST II	876°7	21.0	0	00.0	0	00.0	0	00.0
INFORMATION TECHNOLOGIST III	471,2 183 31	90.0	0	00.0	0	00.0	0	00.0
INFORMATION TECHNOLOGIST III	189,81	96.0	0	00.0	0	00.0	0	00.0
INFORMATION TECHNOLOGIST IV	242,02 620	64.0	0	00.0	0	00.0	0	00.0
INFORMATION TECHNOLOGY SPEC II	981 9	11.0 90.0	000 0E 0	00.0	0	00.0	0	00.0
INFORMATION TECHNOLOGY SPEC II	951,9	60 [.] 0	300,08	00.0	0	00.0	0	00.0
SENIOR AUDITOR	0 696'7 7	78.0	247,18 198	00.1	0	00.0	0	00.0
ACCOUNTANT II	0	00.0	129 81	00.0	0	00.0	0	00.0
ACCOUNTING SPECIALIST III	223,84 00,001	00.1	723,84 728,84	00.1	0	00.0	0	00.0
ACCOUNTING SPECIALIST III	024,601 685 58	26.1 78.1	133,203	2.00	0	00.0	0	00.0
EXECUTIVE II	£9Z,78 £08 £0	78.1 00.1	669,27 96, AV	2.00	0	00.0	0	00.0
MANAGEMENT ANALYSIS SPEC II	92 <i>V</i> 08	00.1 £8.0	44,269	00.1	0	00.0	0	00.0
MANAGEMENT ANALYSIS SPEC II	974,0E	£9.0	938 916	00.1	0	00.0	0	00.0
HEALTH PROGRAM REP I	324,168 324,168	6.63	318,856	00.7 00.35	0 0	00.0	0	00.0
II ЯВОӨВАР ИБЕГИН БЕГИН	216,638 26,638	22.70 00 b	769,820,1 907,872	26.00 4.00	0	00.0	0	00.0
HEALTH PROGRAM COORDINATOR	492,41 785,381	4.09 4.09	607,872 0	00.4 00.0	0	00.0 00.0	0	00.0 00.0
HEALTH FACILITIES CUSLT			726,264	00.11	0		-	
EMERGENCY MEDICAL SVCS INSP I	465,484 755,484	8.19 24.2		2.00	0	00.0 00.0	0	00.0 00.0
EMERGENCY MEDICAL SVCS INSPIR	101,006 22,693	⊅9 [°] 0	096' 1 9 096'300	1.00	0	00.0	0	00.0
COOR OF CHILDRENS PROGRAMS	997'97	86.0	079'67	00.1	0	00.0	0	00.0
CHILD CARE FACILITY SPEC I	769°16	2.75	606	00.0	0	00.0	0	00.0
CHILD CARE FACILITY SPEC II	1,622,576	40.34	419,0E9,1	00.74	0	00.0	0	00.0
CHILD CARE FACILITY SPEC III	998,776	15.8	727,024	00.6	0	00.0	0	00.0
CHLD CARE PRGM SPEC	127,48	1.38	198,52	00.1	0	00.0	0	00.0
FACILITY INSPECTOR	8£7,666	08.81	949,797	13.00	0	00.0	0	00.0
VI NAITITIAN IV	£99'9 †	86.0	49,230	00.1	0	00.0	0	00.0
HEALTH FACILITIES URSNG CUSLT	985,797,1	31.22	2,170,166	36.00	0	00.0	0	00.0
FACILITY ADV NURSE I	896,16	69.0	0	00.0	0	0.00	0	00.00

BUDGET

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ACTUAL

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СОГЛШИ	СОГЛШИ	ЭТЯ	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	Budget Object Class
								DIV OF REGULATION & LICENSURE
-			-				·	CORE
00.0	0	00.0	0	60.69	Z37,887,4	£1.87	069,710,4	FACILITY ADV NURSE II
00.0	0	00.0	0	23.00	140,453,1	18.82	1,309,912	FACILITY ADV NURSE III
00.0	0	00.0	0	00.f	050,17	86.0	£67,28 £61,68	DEZICH ENGK II
00.0	0	00.0	0	00.1	£01,88	00.1	971,48	ARCHITECT II
00.0	0	00.0	0	00.0	0	00.0	968	ADLT PROT & CMTY WKR II
00.0	0	00.0	0	00.0	996 977 6	05.0	218,81	FACILITY SURVEYOR II
00.0	0	00.0	0	00.18	834 VE8	99 E1	2,592,229	FACILITY SURVEYOR III
00.0	0	00.0	0	00.81	083 C1V	80.51	220 968 916'969	FACILITY SURVEYOR III
00.0	0	00.0	0	01.8	412,530	50.7 181	770,892 296,321	INVESTIGATOR II
00.0	0	00.0	0	2.00	527,041 580 05	18.1 39.0	125,283	FISCAL & ADMINISTRATIVE MGR B1
00.0	0	00.0	0	00.1 00.8	496'6Z	80.7 80.7	13,204	INVESTIGATION MGR B1
00.0	0	00.0	0	00.8	921,049	80.7	999'187	REGISTERED NURSE MANAGER B1
00.0	0	00.0	0	00.0	921,1 371,1	00.0	1 233 803	REGISTERED NURSE MANAGER B2
00.0	0	00.0	190 001	26.00	781,008,1 130,501	79.62 28.0	69,853,1 908,18	DIVISION DIBECTOR HEALTH & SENIOR SVCS MANAGER 1
00.0	0	00.1	100,451 303 10	00.1	102,054	28.0 88.0	996,18	DIVISION DIRECTOR
00.0	0	00.1	979'16	00.1	801,89	98.0 98.0	891,77 881,47	DEPUTY DIVISION DIRECTOR
00.0	0	00.1 88 h	006 928	00.1 90.0	418,74 58011	68.0	198,24 038 99	DESIGNATED PRINCIPAL ASST DIV
00.0	0	78.4 98.4	006,872	96 [.] 0	796,011	01.1 31.9	098'69	PROJECT SPECIALIST
00.0	0	28.2 0.33	153,600	25.2 65.0	153,600	2.15 0.24	911 22 979'071	CHIEL CONNSET FEGYT CONNSET
	-	/	397.21		39,093		720°C	BOARD MEMBER
00.0	0	00.1 EE.0	98£ 9८ 98£ 9८	01.0 EE.0	1,219 285,92	£0.0 ££.0	5,924 5,924	SENIOR COUNSEL
00.0	0	06.0	76,385 76,197	00.0	0	16.0	8,046 8,046	TYPIST
00.0	0	00.0	0	00.0	0	60.03	1,238	MISCELLANEOUS PROFESSIONAL
00.0	0	60.0	£12,8	00.0	0	00.0	0	ASSISTANT COOK
00.0	0	00.1	171'69	00.1	062,74	44.1	090,48	SPECIAL ASST PROFESSIONAL
00.0	0	00.0	0	00.0	₽ Z	£1.0	110'9	SPECIAL ASST OFFICE & CLERICAL
00.0	0	2.00	GII,601	2.00	009,011	16.1	<i>t</i> 9t'66	PRINCIPAL ASST BOARD/COMMISSON
00.0	0	1.33	828,858	1.93	986,388	94.0	78,436	NURSING CONSULTANT
00.0	0	29.01	840,748	00.0	0	00.0	0	TNATSISSA TAOAGUS NIMDA
00.0	0	15.90	205,402	00.0	0	00.0	0	LEAD ADMIN SUPPORT ASSISTANT
00.0	0	76.2	121,294	00.0	0	00.0	0	ADMIN SUPPORT PROFESSIONAL

BUDGET

FY 2021

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Decision Item

Budget Unit

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FUEL & UTILITIES 0.00 2,406 0.00 2,406 0.00 0.00 0.00	0.0	7,40	00.0	5,406	00.0	0) (00.0
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0.00 \$17,81£, IN-STATE 1,109,891 0.00 1,562,550 0.00 1,418,712 0.00	١٥.٥ ١٥	1,562,55	00.0	217,814,1	00.0	0) (00.0
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21.42 717, 1461, 717 21.42 0.00 0 0.00 0.00 REGULATORY COMPLIANCE MANAGER 0.142	0.0		00.0	∠\Z'\9 \ '\	24.12	0) (00.0
REGULATORY AUDITOR SUPERVISOR 0 0.00 0 0.00 1,033,048 20.55	0.0		00.0	8 1 0,880,1	20.55	0) (00.0
8E.01 86.679,368 0.00 0.00 0.00 3,679,368 76.38	0.0		00.0	896,678,6	86.97	0	0 (00.0
21.27 188,181,6 0.00 0 0.00 3,184,881 72.12	0.0		00.0	188,481,8	21.27	0	0 (00.0
COMPLIANCE INSPECTOR 0.00 0.00 234,536 3.70	0.0		00.0	534,536	3.70	0	0 (00.0
135 INVESTIGATIONS MANAGER 0.00 0.00 0.00 199,620 1.35	0.0		00.0	109,620	1.35	0) (00.0
PUBLIC HEALTH PROGRAM MANAGER 0.00 0.00 153,488 2.07	0.0		00.0	123,488	70.2	0) (00.0
PUBLIC HEALTH PROGRAM SPV 0.00 0.00 0.00 286,797 4.35	0.0		00.0	767,882	4.35	0) (00.0
SR PUBLIC HEALTH PROGRAM SPEC 0.00 0.00 0.00 106,404 1.94	0.0		00.0	707 [,] 901	⊅6°l	0) (00.0
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46.1 638,111 00.0 0 0.00 0 111,855 1.94	0.0		00.0	111,855	76° l	0) (00.0
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NURSE MANAGER 0.00 0.00 0.00 277,841 3.86	0.0		00.0	148,772	38.8	0) (00.0
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REGISTERED NURSE 0 0.00 6,589,133 114.06	0.0		00.0	6,589,133	90.411	0) (00.0
RESEARCH/DATA ANALYST 0.00 0.00 51,623 1.00	0.0		00.0	51,623	00.1	0) (00.0
98.01 810,395,018 0.00 0 0.00 0 395,018 10.86	0.00		00.0	395,018	98.01	0) (00.0
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DOLLAR

BUDGET

FY 2021

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Budget Object Class

Decision Item

Budget Unit

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EX 2022

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00.0 00.0 00.0		183.12 264.34 23.00	162,876,6 \$ 386,403,31\$ 881,809,6 \$	183.12 269.34 23.00	162,876,6 \$ 386,403,31\$ 881,834,3 \$	47.371 88.352 20.31	831,203,8 \$ 378,302,81 \$ 707,738,2 \$	GENERAL REYENUE SUNU TEDERAL FUNDS SUNU THERES SUNDS
00.0	0\$	94.094	644,066,62\$	97.297	644,036,05\$	426.44	\$52,971,45\$	ОВ ТОТЕ ПО ПОТЕТЕТЕТЕТЕТЕТЕТЕТЕТЕТЕТЕТЕТЕТЕТЕТЕТЕТЕ
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00.0	0	00.0	726,086,8	00.0	3'336'456	00.0	ታ 406,974	33 - JATOT
00.0	0	00.0	2,451	00.0	<u>≯80,£</u>	00.0	0	WEBILLABLE EXPENSES
00.0	0	00.0	029,89	00.0	083,530	00.0	∠86'9 1 ⁄	WISCELLANEOUS EXPENSES
00.0	0	00.0	1,201	00.0	2,055	00.0	793	EQUIPMENT RENTALS & LEASES
00.0	0	00.0	£14,8	00.0	019'9	00.0	896'9	BUILDING LEASE PAYMENTS
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00.0	0	00.0	١60,8	00.0	51,143	00.0	128,8	OFFICE EQUIPMENT
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00.0	0	00.0	£48,8	00.0	£ 1 8'9	00.0	0	HOUSEKEEPING & JANITORIAL SERV
								CORE
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BUDGET

FY 2021

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Budget Object Class

Decision Item

Budget Unit

Health and Senio	ealth and Senior Services					Н	B Section(s):	10.900	
Regulation and L	icensure Administration	_							
Program is found	l in the following core bud	get(s):			_				
	DRL Program Operations								TOTAL
GR	472,406								472,406
FEDERAL	505,425								505,425
OTHER	0								0
TOTAL	977,831								977,831

1a. What strategic priority does this program address?

To protect health and keep the people of Missouri safe.

1b. What does this program do?

The Division of Regulation and Licensure (DRL) coordinates the health care and child care licensing programs within the department. The Division Director's Office provides leadership, management, and financial services for the programs which include:

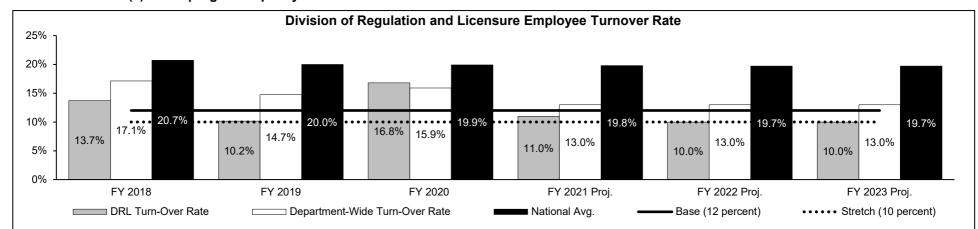
- · Child Care Regulation;
- Long Term Care Regulation;
- Health Standards and Licensure which includes the bureaus of Narcotics and Dangerous Drugs, Emergency Medical Services, Home Care and Rehabilitative Standards, Diagnostic Services, Hospital Standards, Time Critical Diagnosis and Ambulatory Care;
- · Family Care Safety Registry;
- Board of Nursing Home Administrators; and
- · Certificate of Need (CON).

2a. Provide an activity measure(s) for the program.

Services Provided by the DRL Administration in Support of Programmatic Functions							
Payment Documents	6,010	Audit Reports Reviewed	1				
Purchase Orders and Modifications	2,697	Staff Trained on Grant Management	4				
Grant and Contract Reports	80	Fiscal Note Responses	418				
Contracts and Amendments	82	Printing Requisitions	143				

Health and Senior Services	HB Section(s): 10.900
Regulation and Licensure Administration	
Program is found in the following core budget(s):	

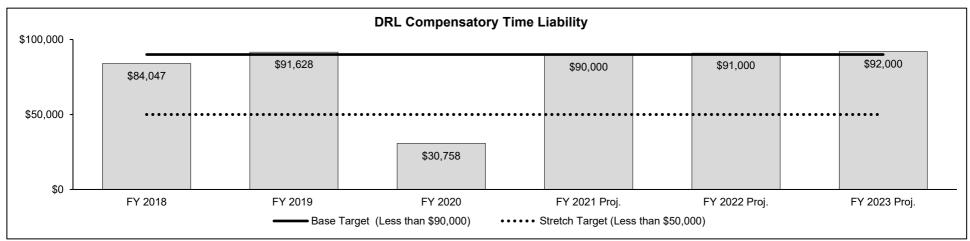
2b. Provide a measure(s) of the program's quality.



FTE for Department and DRL in FY 2019 going forward are FTE worked. Prior to FY 2019, budgeted FTE were used.

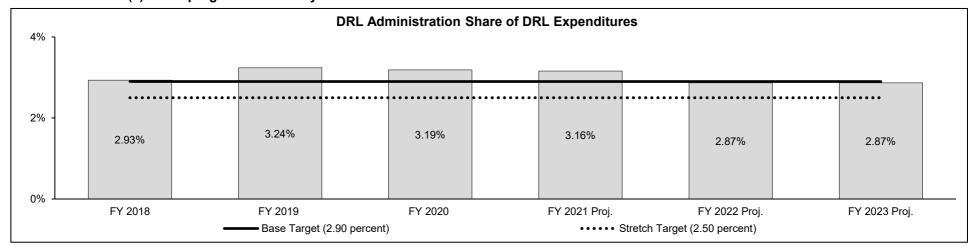
National Average data is from Bureau of Labor and Statistics and reflects the average for State and Local Governments (excluding education). For FY 2019 to FY 2022, the national average is a projected trend. US Department of Labor, Bureau of Labor Statistics. https://www.bls.gov/news.release/jolts.t16.htm (Last updated March 19, 2019.)

2c. Provide a measure(s) of the program's impact.

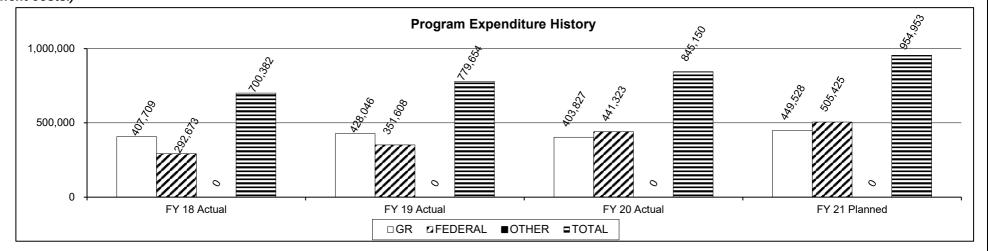


Health and Senior Services	HB Section(s): 10.900
Regulation and Licensure Administration	
Program is found in the following core hudget(s):	

2d. Provide a measure(s) of the program's efficiency.



3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



ш	Health and Senior Services	UP Coation(a): 10 000
_		HB Section(s): 10.900
R	Regulation and Licensure Administration	
Ρ	Program is found in the following core budget(s):	
4.	4. What are the sources of the "Other " funds?	
	Not applicable.	
5.	5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal p	rogram number, if applicable.)
	Portions of Chapters 190, 192, 195, 197, 198, 210, and 344, RSMo. Specific section references for each as the federal authority for specific activities, are included on division program description pages.	program, as well
6.	6. Are there federal matching requirements? If yes, please explain.	
	Federal matching requirements for specific activities are included on division program description pages.	
7.	7. Is this a federally mandated program? If yes, please explain.	
	The federal mandate for specific activities is included on division program description pages.	

Health and Senior Services					HB Section(s): 10.900			
Board of Nursing	Soard of Nursing Home Administrators					. ,		
Program is found	d in the following core bu	dget(s):			_			
	DRL Program Operations							TOTAL
GR	131,627							131,627
FEDERAL	7,466							7,466
OTHER	0							0
TOTAL	139.093							139.093

1a. What strategic priority does this program address?

To protect health and keep the people of Missouri safe.

1b. What does this program do?

- Promulgates regulations that establish qualifications for licensure, testing standards, and license renewal requirements of licensed administrators in a skilled, intermediate care, assisted living, or residential care facility that follows the residential care facility II regulations.
- Conducts hearings affording due process of law, upon charges calling for discipline of a licensee.
- Evaluates applicant's qualifications for licensure, issues licenses, and renews licenses of qualified licensees.

2a. Provide an activity measure(s) for the program.

Activities	FY 2020
Initial Applications for Licensure	306
New Licenses Issued	128
Administrator Exams-Federal and State	311
Licenses Renewed	603
Legal Actions - Complaints/ Disciplinary Proceedings	5

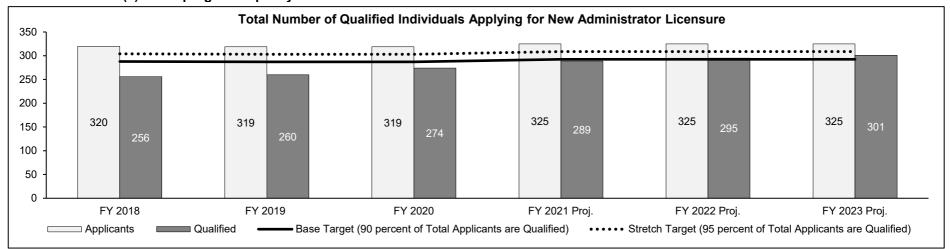
Health and Senior Services

HB Section(s): 10.900

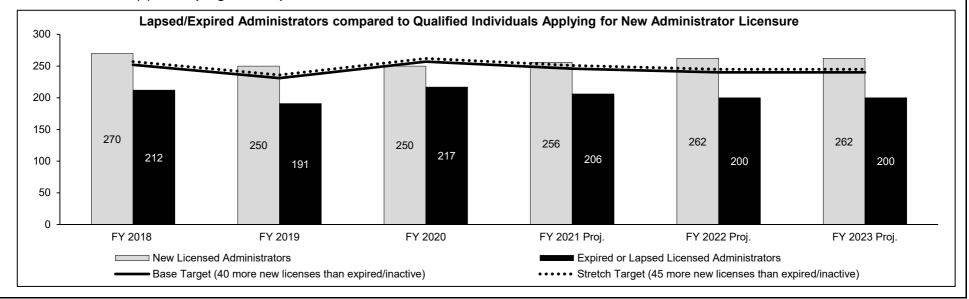
Board of Nursing Home Administrators

Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality.



2c. Provide a measure(s) of the program's impact.



Health and Senior Services

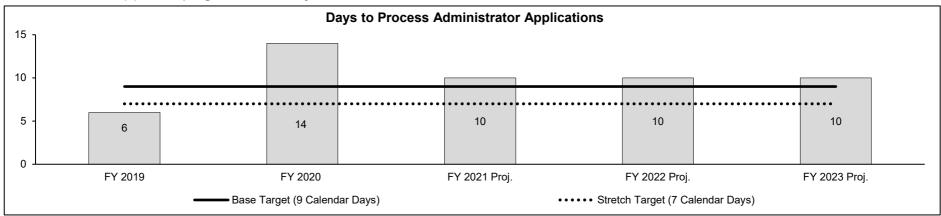
Board of Nursing Home Administrators

Program is found in the following core budget(s):

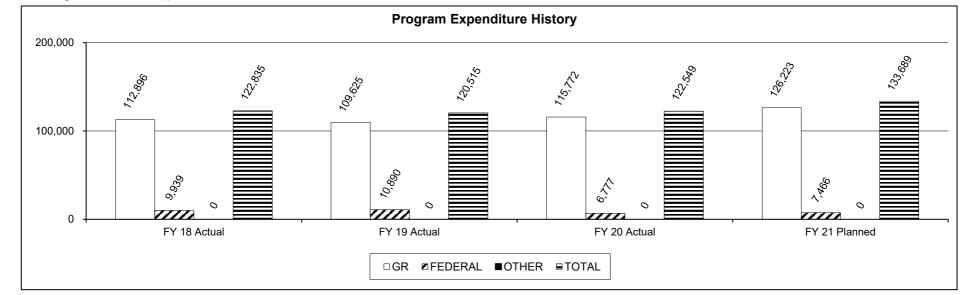
HB Section(s): 10.900

HB Section(s): 10.900

2d. Provide a measure(s) of the program's efficiency.



3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



Health and Senior Services	HB Section(s): 10.900
Board of Nursing Home Administrators	
Program is found in the following core budget(s):	

4. What are the sources of the "Other " funds?

Not applicable.

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Chapter 344, RSMo.

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

Yes, Social Security Act-Section 1819(d)(1)(C), (e)(4), and (f)(4); Section 1902(a)(29); Section 1908; and Section 1919(d)(1)(C), (e)(4), and (f)(4); 42 CFR 431.700-431.715.

Health and Senio	lealth and Senior Services				HB Section(s):10.900				
Emergency Medi	mergency Medical Services								
Program is found	in the following core bud	dget(s):							
	DRL Program Operations							TOTAL	
GR	420,191							420,191	
FEDERAL	785,569							785,569	
OTHER	0							0	
TOTAL	1,205,760							1,205,760	

1a. What strategic priority does this program address?

To protect health and keep the people of Missouri safe and Reduce opioid misuse.

1b. What does this program do?

- Assures all levels of licensed Emergency Medical Technicians, ambulance services, training entities, response agencies, and stretcher van services comply with minimum education, training, treatment, and operational standards.
- Investigates complaints from the public in regards to Emergency Medical Services (EMS) practices.
- Assures patient care reporting meets or exceeds state and national standards.
- Administers the Missouri Overdose Rescue and Education grant, which funds training in the use of naloxone to first responders throughout Missouri. The grant also funds the purchase and distribution of naloxone to trained first responders.

2a. Provide an activity measure(s) for the program.

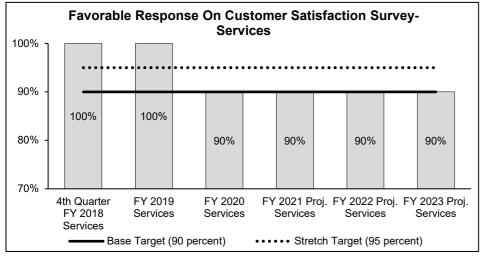
Emergency Medical Technicians Licensed										
	FY 2018	FY 2019	FY 2020	FY 2021 Proj.	FY 2022 Proj.	FY 2023 Proj.				
Total Number of EMTs Licensed	18,502	18,609	19,259	19,909	20,449	20,449				
EMT-Basic	11,557	11,509	11,917	12,325	12,633	12,633				
EMT-Paramedic	6,883	6,951	7,166	7,381	7,596	7,596				
Advanced EMT	62	57	70	83	86	86				
Community Paramedic	73	92	106	120	134	134				

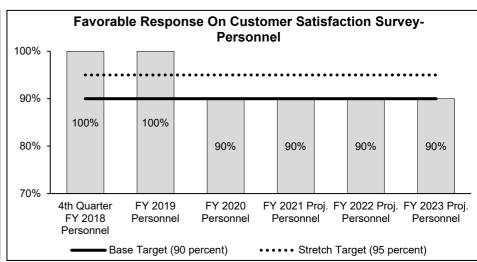
Health and Senior Services	HB Section(s): 10.900
Emergency Medical Services	
Program is found in the following core budget(s):	

2a. Provide an activity measure(s) for the program. (continued)

Services Licensed										
	FY 2018	FY 2019	FY 2020	FY 2021 Proj.	FY 2022 Proj.	FY 2023 Proj.				
Ground Ambulance	217	217	222	222	222	222				
Air Ambulance	14	15	17	19	19	19				
Emergency Medical Response Agency	42	42	59	76	80	80				
Training Entities	273	268	364	400	425	425				
EMT-B relicensing	1,163	1,086	906	1,194	1,163	1,163				
EMT-P relicensing	1,275	969	807	1,147	1,275	1,275				

2b. Provide a measure(s) of program's quality.



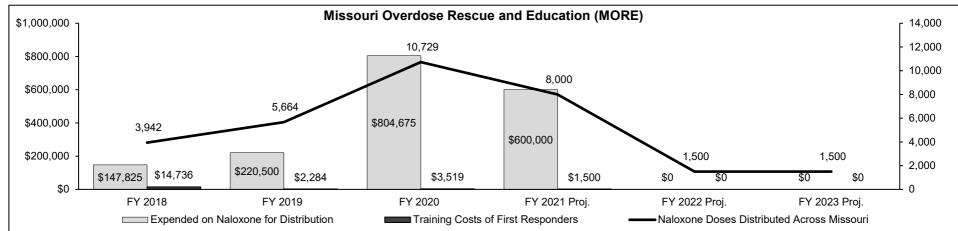


Note: EMS began sending customer surveys to individuals (Personnel) and EMS services (Services) in the 4th quarter of FY 2018. The limited number of responses were all positive; however, EMS does not expect all responses to be favorable in the future due to the nature of the work.

lealth and Senior Services	HB Section(s):10.900
mergency Medical Services	

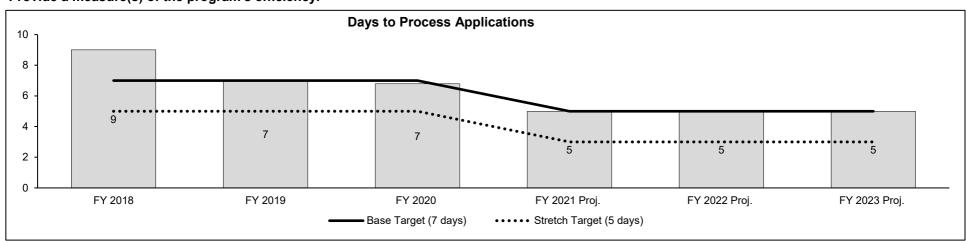
Program is found in the following core budget(s):

2c. Provide a measure(s) of the program's impact.



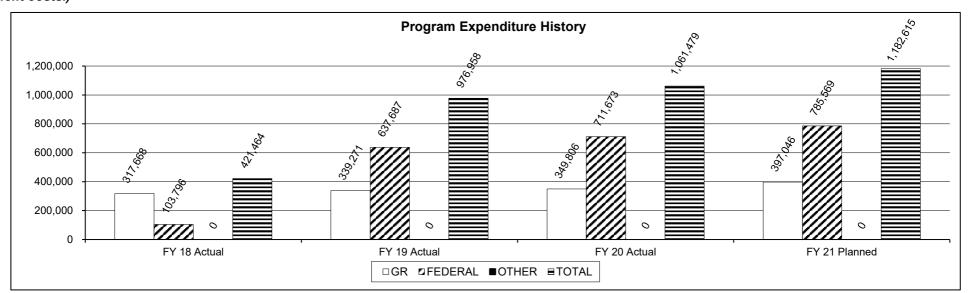
Note: The MORE program started operating in January 2018. Funding is determined by the federal grant amount. During FY 2019 EMS started the transition from in-seat training to online training, in order to allocate additional funding into naloxone purchases.

2d. Provide a measure(s) of the program's efficiency.



Health and Senior Services	HB Section(s): 10.900
Emergency Medical Services	
Program is found in the following core budget(s):	

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Not applicable.

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 190.001 to 190.248, 190.255 and 190.525 to 190.621, RSMo.

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

No.

Health and Sen	ior Services		HB Section(s): 10.900				
Family Care Sa	fety Registry (FCSR)		·		-		
Program is fou	nd in the following core bud	lget(s):					
	DRL Program Operations					TOTAL	
GR	852,852					852,852	
FEDERAL	277,030					277,030	
OTHER	0					0	
TOTAL	1,129,882					1,129,882	

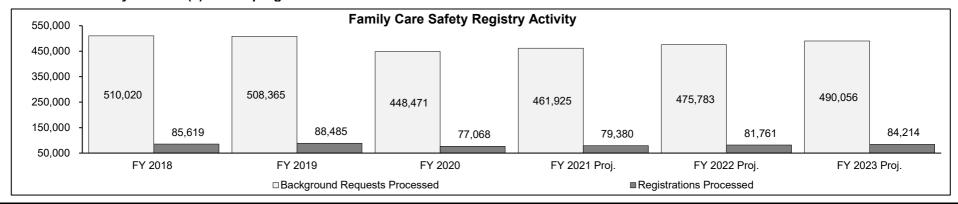
1a. What strategic priority does this program address?

Improve the health and safety of Missourians most in need.

1b. What does this program do?

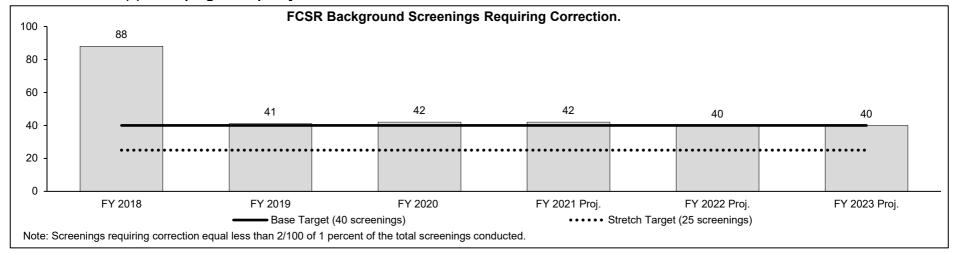
- Provides background screenings to assist employers and families with determining if a potential caregiver represents a risk to vulnerable person(s) in care. The results of this screening enable employers or families to rule out those who may represent risk. Caregivers for children, seniors, and disabled persons are required to register within fifteen days of hire.
- Background screenings include criminal history, sex offender registry information, child abuse and neglect information; employee disqualification lists for both DMH and DHSS, child care and foster parent license denials; revocations, and involuntary suspensions.
- Caregivers may work in the following locations: child care settings, children's residential facilities, long-term care facilities, mental health facilities, home health, hospice, in-home care or personal care agencies; or other organizations caring for children, seniors, or disabled persons.
- Collects a one-time registration fee that is deposited in the Criminal Record System Fund, which is administered by the Department of Public Safety.

2a. Provide an activity measure(s) for the program.

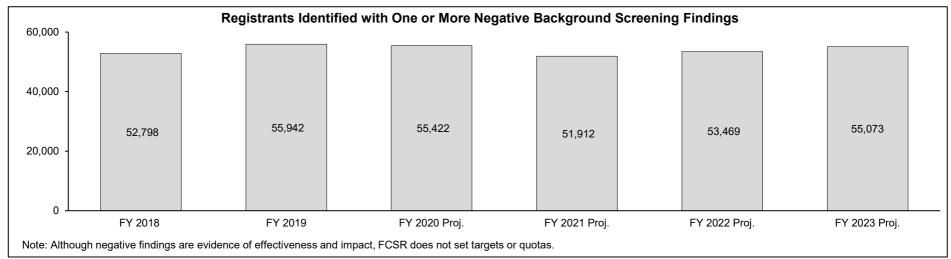


Health and Senior Services	HB Section(s): 10.900
Family Care Safety Registry (FCSR)	
Program is found in the following core hudget(s):	

2b. Provide a measure(s) of the program's quality.



2c. Provide a measure(s) of the program's impact.



Health and Senior Services

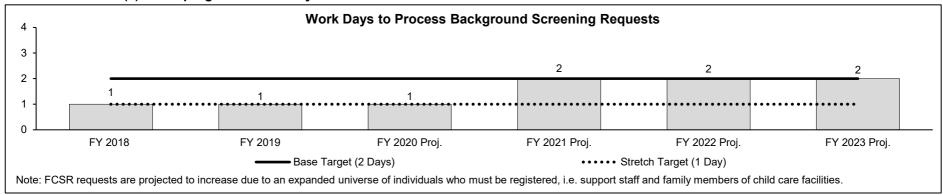
Family Care Safety Registry (FCSR)

Program is found in the following core budget(s):

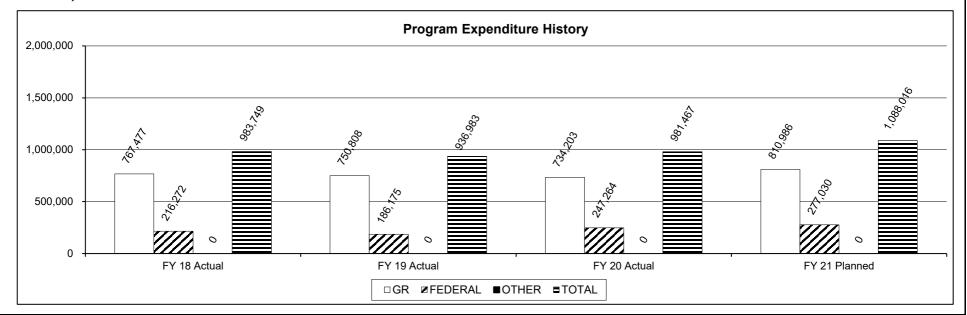
HB Section(s): 10.900

10.900

2d. Provide a measure(s) of the program's efficiency.



3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



H	lealth and Senior Services	HB Section(s): 10.900
Fá	family Care Safety Registry (FCSR)	· · · · · · · · · · · · · · · · · · ·
Pı	Program is found in the following core budget(s):	
4.	. What are the sources of the "Other " funds?	
	Not applicable.	
5.	i. What is the authorization for this program, i.e., federal or state statute, etc.? (In	clude the federal program number, if applicable.)
	Sections 210.900 to 210.936, RSMo.	
6.	3. Are there federal matching requirements? If yes, please explain.	
	Yes, the program is required to match Medicaid (Title XIX) funds at a state match rate	e of 50 percent.
7.	. Is this a federally mandated program? If yes, please explain.	
	No.	

Department of Health and Senior Services

Long Term Care

HB Section(s): 10.900

Program is found in the following core budget(s):

Togram is found in the following core budget(s):									
	DRL Program								TOTAL
	Operations								TOTAL
GR	4,410,360								4,410,360
FEDERAL	9,431,466								9,431,466
OTHER	3,694,004								3,694,004
TOTAL	17,535,830								17,535,830

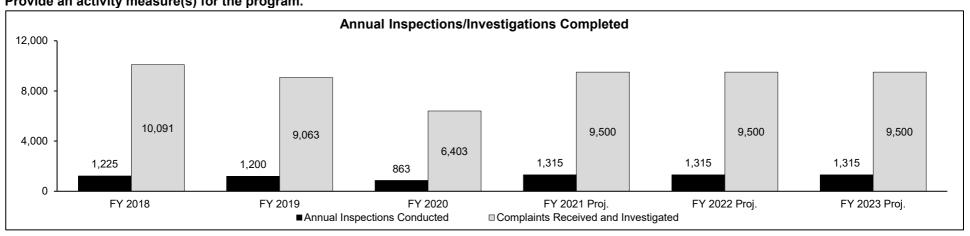
1a. What strategic priority does this program address?

To protect health and keep the people of Missouri safe.

1b. What does this program do?

- Conducts yearly inspections in long-term care facilities, intermediate care facilities for individuals with intellectual disabilities, and adult day care centers to ensure facilities are meeting state and/or federal health and safety requirements.
- Conducts complaint investigations within prescribed timeframes based on seriousness of the allegations and the impact on the health, safety, and welfare of residents.
- Administers the certified nurse aide, certified medication technician, and level one medication aide programs to ensure qualified workers are available for employment in facilities.
- Reviews pre-admission documents to ensure residents admitted to Medicaid certified long-term care facility beds meet the required level of care.

2a. Provide an activity measure(s) for the program.



HB Section(s):

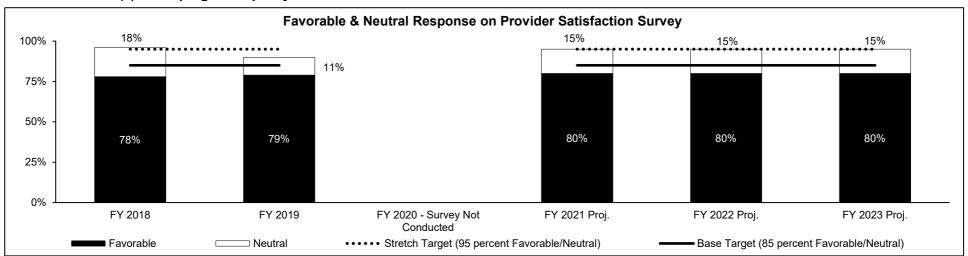
10.900

Department of Health and Senior Services

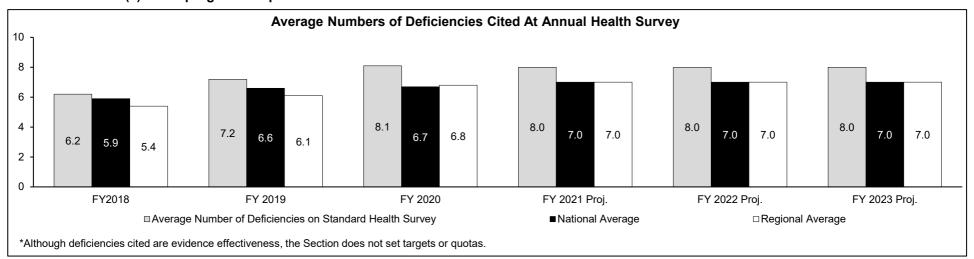
Long Term Care

Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality.



2c. Provide a measure(s) of the program's impact.



Department of Health and Senior Services

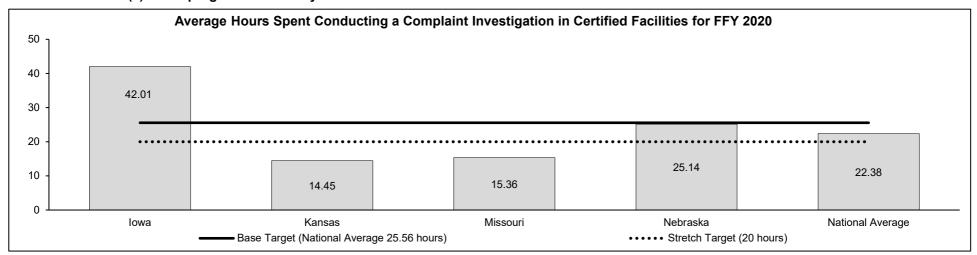
HB Section(s):

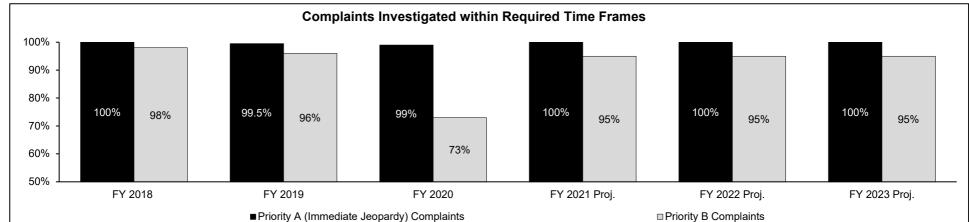
10.900

Long Term Care

Program is found in the following core budget(s):

2d. Provide a measure(s) of the program's efficiency.





Note: Per Section 198.070.6, RSMo, all Priority A complaints must be done in a twenty-four hour time frame. Priority B complaints must be completed within 10 days. Priority B projection decrease is due to projected increase in total complaint numbers.

HB Section(s):

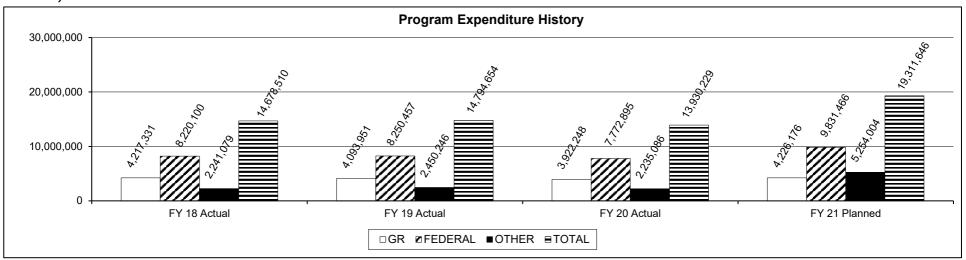
10.900

Department of Health and Senior Services

Long Term Care

Program is found in the following core budget(s):

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Federal funds consist of Department of Health and Senior Services Federal (0143), Nursing Facility Federal Reimbursement Allowance (0196), Nursing Facility Quality of Care (0271), and Department of Health and Senior Services Federal Stimulus (2350).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 198.003 to 198.186, 198.500 to 198.528, 198.532 to 198.545, 192.2000, 192.2490, 192.2495 to 192.2500, and 192.2200 to 192.2260, RSMo; Federal Statutory and Regulatory Citations: Sections 1819, 1864, 1902, and 1919 of the Social Security Act and 42 CFR 488.1 to 488.456, 42 CFR Part 483, 42 CFR Part 488 Subpart E, 42 CFR 483.400 (Chapter IV, Subpart 1), 42 CFR 483.150, 42 CFR Chapter IV, Part 456, Subpart F, and 42 CFR 483.20(m).

6. Are there federal matching requirements? If yes, please explain.

Yes, the program is required to match Medicaid (Title XIX) funds; the state match ranges from 25 to 50 percent.

7. Is this a federally mandated program? If yes, please explain.

Yes, the Section for Long-Term Care Regulation is mandated by the Social Security Act to certify and inspect all long-term care facilities qualified to participate in the Medicaid/Medicare programs.

RANK: ____5 OF ___14

	f Health and Senio				Budget Unit 58	858C			
Division of Re	gulation and Lice	nsure							
Authorized Ele	ectronic Monitorin	g) # 1580005	HB Section 10	.900			
1. AMOUNT O	F REQUEST								
	FY	2022 Budge	t Request			FY 2022	Governor's	Recommend	ation
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	38,023	64,741	0	102,764	PS	0	0	0	0
EE	2,779	10,775	0	13,554	EE	0	0	0	0
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	40,802	75,516	0	116,318	Total	0	0	0	0
FTE	0.74	1.26	0.00	2.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	22,989	39,143	0	62,131	Est. Fringe	0	0	0	0
Note: Fringes	budgeted in House	Bill 5 except	for certain frir	iges	Note: Fringes b	udgeted in l	House Bill 5 e	xcept for certa	ain fringes
budgeted direc	tly to MoDOT, High	way Patrol, a	nd Conservat	ion.	budgeted directi	y to MoDOT	, Highway Pa	atrol, and Cons	servation.
2. THIS REQU	EST CAN BE CATI	EGORIZED A	S:						
Χ	New Legislation			N	/ Program		F	und Switch	
	Federal Mandate		_		gram Expansion	_		Cost to Continu	ue
	GR Pick-Up		_		ce Request	_	E	Equipment Rep	olacement
	– Pay Plan				er:	_			'

RANK:	5	OF	14

Department of Health and Senior Services		Budget Unit 58858C
Division of Regulation and Licensure	_	
Authorized Electronic Monitoring	DI# 1580005	HB Section 10.900

3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

House Bills 1387 and 1482, enacted during the 2020 Regular Session, requiring the Division of Regulation and Licensure (DRL), Section for Long-Term Care Regulation (SLCR) to promulgate rules and create a notification and consent form for authorization of electronic monitoring to be conducted in a Skilled Nursing Facility/Intermediate Care Facility (SNF/ICF) and Residential Care Facility/Assisted Living Facility (RCF/ALF) resident's room. The legislation also allows the footage from the electronic monitoring devices to be admitted into evidence in a criminal, civil, or administrative proceeding, as well as be used to fulfill the reporting requirements for abuse and/or neglect to the department, which will require follow-up and investigation by SLCR as well as the need to maintain the footage for evidential purposes. In addition, any resident or legal representative may contact the department if a facility refuses to allow authorized electronic monitoring.

The number of electronic monitoring notification and consent forms that may be completed and signed by residents or tapes and recordings submitted under a complaint investigation is unknown at this time, but could be in the thousands. In addition, the Section expects to receive a multitude of contacts from residents and legal representatives regarding facilities refusing placement, which may require an investigation by the Section to resolve. The Section is requesting a Regulatory Compliance Manager and a Public Health Program Associate to oversee the requirements of this legislation.

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

One Regulatory Compliance Manager (\$65,694 based on equivalent level managers in the division) and one Public Health Program Associate (\$37,070 based on the average starting salary in the division) will be needed to coordinate receipt of tapes or recordings and provide technical assistance to facilities, residents, and legal representatives concerning forms and electronic monitoring.

RANK: <u>5</u> OF <u>14</u>

Department of Health and Senior Services
Division of Regulation and Licensure

Budget Unit 58858C

Authorized Electronic Monitoring

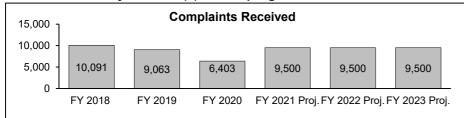
DI# 1580005

HB Section 10.900

5. BREAK DOWN THE REQUEST BY BUDG	GET OBJECT	CLASS, JOB	CLASS, AND	FUND SOU	RCE. IDENT	IFY ONE-TIM	IE COSTS.		
	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req
	GR	GR	FED	FED	OTHER	OTHER	TOTAL	TOTAL	One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Regulatory Compliance Manager (21RB70)	24,307	0.37	41,387	0.63	0	0.0	65,694	1.0	0
Public Health program Assoc (19PH10)	13,716	0.37	23,354	0.63	0	0.0	37,070	1.0	0
Total PS	38,023	0.74	64,741	1.26	0	0.0	102,764	2.00	0
Supplies (190)	265		1,025		0		1,290		0
Communication Serv and Supp (340)	180		698		0		878		290
Motorized Vehicles (560)	38		148		0		186		0
Office Equipment (580)	2,296		8,904		0		11,200		11,200
Total EE	2,779	•	10,775	•	0		13,554	•	11,490
Grand Total	40,802	0.7	75,516	1.3	0	0.0	116,318	2.0	11,490

6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)

6a. Provide an activity measure(s) for the program.



6b. Provide a measure(s) of the program's quality.

Complaints Received Regarding Electronic Monitoring						
FY 2021	FY 2023 Proj.					
500	500	500				

6c. Provide a measure(s) of the program's impact. Number of Employee Disqualification List referrals utilizing footage from Electronic Monitoring

FY 2021 Proj.	FY 2022	FY 2023	
Proj.	Proj.	Proj.	
20	20	20	

6d. Provide a measure(s) of the program's efficiency.

	FY 2021 Proj.	FY 2022 Proj.	FY 2023 Proj.
Substantiated Abuse/Neglect Complaints Utilizing Footage	50%	50%	50%
Overall Substantiated Abuse/Neglect Complaints	15%	15%	15%

RANK:	5	OF	14

Department of Health and Senior Services	Budget Unit 58858C
Division of Regulation and Licensure	
Authorized Electronic Monitoring DI# 15800	005 HB Section 10.900
17 STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREM	ENT TARGETS:

The Section for Long Term Care Regulation will utilize the two FTE to ensure footage is received in an acceptable format, that it is securely stored and is accessible for the purposes of pursuing Employee Disqualification List Referrals for perpetrators or abuse or neglect.

DECISION ITEM DETAIL

SECURED

2ECNKED

DEPT REQ

EX 2022

DEPT REQ

EX 2022

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00.0	0\$	2.00	816,311\$	00.0	0\$	00.0	0\$	ОТАТОТ ОТАТОТ
00.0	0	00.0	13,554	00.0	0	00.0	0	33 - JATOT
00.0	0	00.0	11,200	00.0	0	00.0	0	OFFICE EQUIPMENT
00.0	0	0.00	182	00.0	0	00.0	0	MOTORIZED EQUIPMENT
00.0	0	0.00	648	00.0	0	00.0	0	COMMUNICATION SERV & SUPP
00.0	0	0.00	ا 500′	00.0	0	00.0	0	SUPPLIES
00.0	0	2.00	102,764	00.0	0	00.0	0	29 - JATOT
00.0	0	00.1	247,42	00.0	0	00.0	0	REGULATORY COMPLIANCE MANAGER
00.0	0	00.1	38,022	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM ASSOC
								Authorized Electr Monitoring - 1580005
								DIV OF REGULATION & LICENSURE
СОГЛШИ	СОГЛШИ	ЭТЯ	DOLLAR	ЭТЯ	DOLLAR	ЭТЯ	DOLLAR	Budget Object Class

BUDGET

FY 2021

BUDGET

FY 2021

AUTDA

LA 5050

AUTDA

LA 5050

Decision Item

Budget Unit

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RANK: 5

Department of	Health and Senio	r Services		Budget Unit 588					
	gulation and Lice	nsure							
CMS CARES A	Act Funding) # 1580006	HB Section	10.900			
4 440000	E DECLIECT								
1. AMOUNT C									
	FY	/ 2022 Budge	t Request			FY 202	2 Governor's	Recommend	ation
	GR	Federal	Other	Total	_	GR	Federal	Other	Total
PS	0	400,000	0	400,000	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	0	400,000	0	400,000	Total	0	0	0	0
					-				
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	132,480	0	132,480	Est. Fringe	0	0	0	0
Note: Fringes	budgeted in House	Bill 5 except f	for certain frin	ges	Note: Fringe:	s budgeted in	House Bill 5 ex	xcept for certa	in fringes
budgeted direc	tly to MoDOT, High	way Patrol, ar	nd Conservati	on.	budgeted dire	ectly to MoDO	T, Highway Pa	trol, and Cons	ervation.
2 THIS DECIL	EST CAN BE CAT	ECODIZED A	ç.						
Z. IIIIO NEQU	New Legislation	LOOKIZED A	<u> </u>		New Program		F	und Switch	
X	Federal Mandate		_		Program Expansion	-		Cost to Contin	ua.
	GR Pick-Up		_		Space Request	-		Equipment Re	
	_		_		•	-		-quipinient Ne	piacement
	Pay Plan				Other:				

The Coronavirus Aid, Relief, and Economic Security Act (CARES Act) (P.L. 116-136) legislation provided supplemental Medicare funding of at least \$100,000,000 to the Centers for Medicaid and Medicare Services (CMS) to fund backlogged Survey and Certification activities related to COVID-19 response it prioritized nursing homes in locations with coronavirus community spread. CMS called for states to focus surveys on Focused Infection Control and provided a streamlined tool to facilitate these efforts. There is currently wide variation in the number of Focused Infection Control surveys of nursing homes performed by states, between 11 percent - 100 percent (with a national average of approximately 54.1 percent). Based on the COVID-19 nursing home data being reported to the CDC, CMS believes further direction is needed to prioritize completion of Focused Infection Control surveys in nursing homes. Missouri was awarded \$2,739,696 to complete backlogged surveys and Focused Infection Control nursing home surveys for the periods of FFY 2020 through FFY 2023.

CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

RANK:	5	OF	14	
	_			

Department of Health and Senior Services		Budget Unit 58858C
Division of Regulation and Licensure		
CMS CARES Act Funding	DI# 1580006	HB Section 10.900

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

CMS provides supplemental Medicare funding for Survey and Certification activities related to the COVID-19 response. Missouri anticipated receiving a federal award of \$600,000; \$300,000 of which will be used for personal services and \$300,000 in expense and equipment costs. The Division of Regulation and Licensure (DRL) requested, and received, federal appropriation authority based on the above estimation. On June 1, 2020, CMS revised the funding guidelines for receiving the CARES Act funding by requiring states to complete 100 percent of its Focused Infection Control surveys in nursing homes by July 31 2020, in addition to completing the backlogged certification and surveys. Missouri was awarded \$574,927 and an additional \$575,677 totaling \$1,150,604 in FFY 2020. Based on the current completion rate of the Infection Control Surveys, Missouri is eligible to receive an additional \$1,589,092 for the reminder of the funding period through FFY 2023.

5. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE. IDENTIFY ONE-TIME COSTS.

	Dept Req GR	Dept Req GR	Dept Req FED	Dept Req FED	Dept Req OTHER	Dept Req OTHER	Dept Req TOTAL	Dept Req TOTAL	Dept Req One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Registered Nurse (05NU30)	0	0.0	400,000	0.0	0	0.0	400,000	0.0	
Total PS	0	0.0	400,000	0.0	0	0.0	400,000	0.0	0
Grand Total	0	0.0	400,000	0.0	0	0.0	400,000	0.0	0

6. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)

6a. Provide an activity measure(s) for the program.

Surveys and Certification Completed Yearly							
	FY 2021	FY 2022	FY 2023				
	Proj.	Proj.	Proj.				
Long Term Care Regulation	525	527	529				
Hospital Standards and Licensure	650	650	650				
Total	1,175	1,177	1,179				

6b. Provide a measure(s) of the program's quality.

Yearly Backlogged Certification and Surveys							
	FY 2021	FY 2022	FY 2023				
	Proj.	Proj.	Proj.				
Long Term Care Regulation	350	100	30				
Hospital Standards and Licensure	170	70	30				
Total	520	170	60				

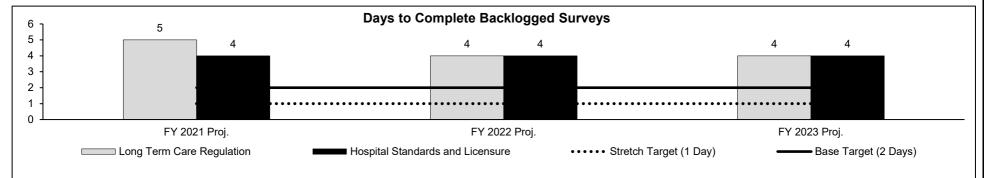
RANK: 5 OF 14

epartment of Health and Senior Services		Budget Unit 58858C		
Division of Regulation and Licensure				
CMS CARES Act Funding	DI# 1580006	HB Section 10.900		

6c. Provide a measure(s) of the program's impact.

Number of Focused Infection Control Surveys Completed							
	EV 0000	EV 0004 B'	EV 0000 Bus!	EV 0000 B'			
	FY 2020	FY 2021 Proj.	FY 2022 Proj.	FY 2023 Proj.			
Long Term Care Regulation	521	500	500	500			
Hospital Standards and Licensure	30	30	30	30			
Total	551	530	530	530			

6d. Provide a measure(s) of the program's efficiency.



LTC Surveys take on average 4 days to complete. For FY 2021, surveys make take longer to complete due to the number of complaints that will be investigated during the annual surveys. These are complaints that were not investigated during the survey suspension timeframe, so they will be investigated as part of the annual survey process.

7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:

The Section for Long Term Care Regulation (SLCR) will prioritize backlog surveys, which are facilities that have not had a survey within the last 15 months. In addition, Focused Infection Control surveys will be prioritized in 20 percent of homes as directed by CMS, as well as those homes with current outbreaks. Each of the seven SLCR regions will prioritize the backlog surveys, resulting in the backlog continuing to decrease so that normal survey operations can continue. In addition, each SLCR region will prioritizing the focused infection control surveys to ensure continued CARES Act Funding.

The Section for Health Standards and Licensure will prioritize backlogged Survey and Certification workload, to include complaints in Hospitals, Home Health, Hospice, ESRD, ASC, CLIA and Rural Health Clinics over the course of the next 3 fiscal years in order to resume normal survey/complaint workload. Additionally, on complaints regarding allegations of infection control failures within the above listed facility types, the HSL will conduct a focused infection control survey along with any necessary required regulatory action.

DECISION ITEM DETAIL

00.0 00.0 00.0		00.0 00.0 00.0	0\$ 000'00 7 \$ 0\$	00.0 00.0 00.0	0\$ 0\$ 0\$	00.0 00.0 00.0	0\$ 0\$ 0\$	GENERAL REVENUE FEDERAL FUNDS OTHER FUNDS
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00.0	0	00.0	000'00 7	00.0	0	00.0	0	89 - JATOT
00.0	0	00.0	000,004	00.0	0	00.0	0	CMS CARES Act Funding - 1580006 REGISTERED NURSE
								DIV OF REGULATION & LICENSURE
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	317	DOLLAR	Budget Object Class
SECURED	SECNKED	DEPT REQ	DEPT REQ	BUDGET	BUDGET	AUTOA	AUTOA	Decision Item
******	******	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit

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Health and Senior Services			HB Section(s): 10.900					
Narcotics and Dangerous Drugs								
Program is found	in the following core bud	get(s):						
	DRL Program Operations						TOTAL	
GR	704,956						704,956	
FEDERAL	0						0	
OTHER	90,937						90,937	
TOTAL	795,893						795,893	

1a. What strategic priority does this program address?

To reduce opioid, and other controlled substance, misuse.

1b. What does this program do?

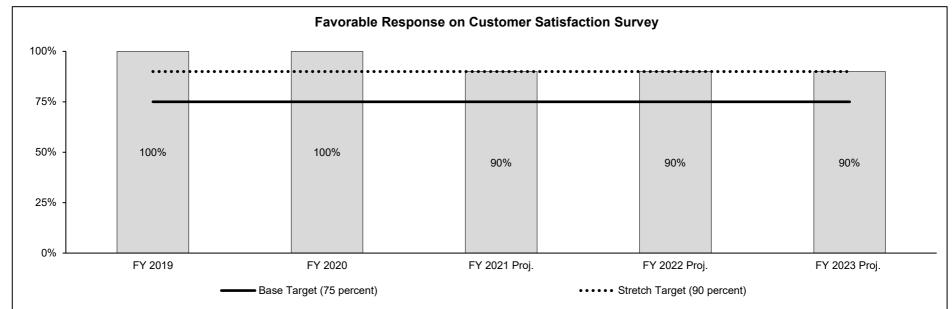
- The mission of the Bureau of Narcotics and Dangerous Drugs (BNDD) is to:
- Maintain a registry of all entities and individuals that conduct activities with controlled substances and manage the statewide pseudoephedrine tracking database.
 - · Registrants include:
 - Physicians;
 - Dentists;
 - Veterinarians:
 - Pharmacies;
 - Hospitals;
 - · Ambulatory surgical centers; and
 - Other entities.
- · Identify the diversion or misuse of controlled substances without prohibiting their appropriate and effective use.
- · Examples of the most common violations include:
 - Practitioner moving and not notifying BNDD;
 - Practitioner prescribed with no chart or established patient relationship;
 - Failure to maintain records to track and account for drugs in stock;
 - · Failure to document controlled substance prescriptions in patient chart; and
 - · Practitioner stealing and abusing drugs.
- Educate health professionals, other regulatory and law enforcement agencies, and the citizens of Missouri regarding controlled substance laws in Missouri.
- Administer the Prescription Monitoring Program via executive order and work with groups addressing opioid abuse.

Health and Senior Services	HB Section(s): 10.900
Narcotics and Dangerous Drugs	
Program is found in the following core budget(s):	

2a. Provide an activity measure(s) for the program.

BNDD Registrants July 2020						
Physicians	22,222					
Dentists	2,799					
Veterinarians	1,371					
Pharmacies	1,869					
Other practitioners	593					
LTCF emergency kit & automated dispensing system	666					
Hosp., ASC, EMS, Mental Health Facilities	3,315					
All Others	552					
Total Registrants	33,387					

2b. Provide a measure(s) of the program's quality.



Note: BNDD received a limited number of responses in 2019, and all were positive; however, BNDD does not expect all responses to be favorable in the future due to the nature of the work.

Health and Senior Services

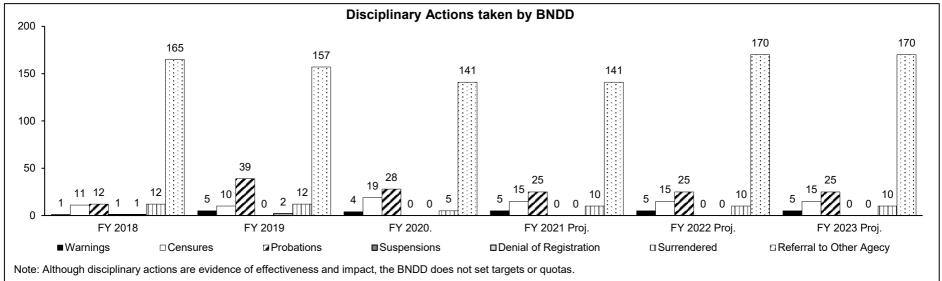
Narcotics and Dangerous Drugs

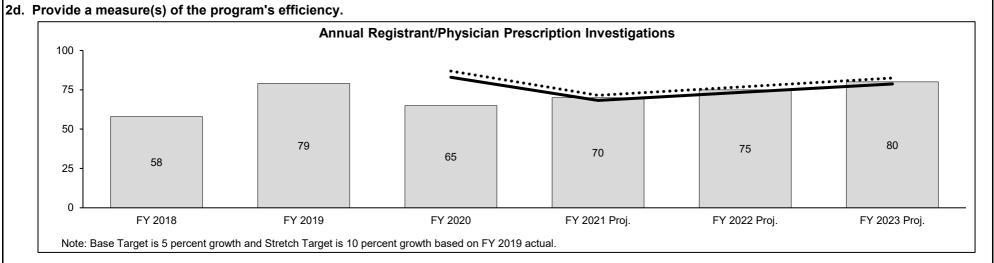
Program is found in the following core budget(s):

HB Section(s): 10.900

10.900

2c. Provide a measure(s) of the program's impact.





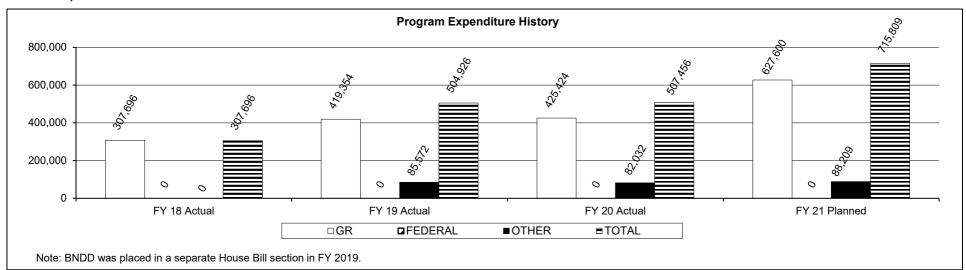
Health and Senior Services

Narcotics and Dangerous Drugs

HB Section(s): 10.900

Program is found in the following core budget(s):

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other" funds?

Health Access Incentive (0276).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 195.005 through 195.425, RSMo; Federal Statutory or Regulatory Citation: 21 USC 823 and 958 and 21 CFR 1301.14.

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

No.

Health and Senior Services
Health Standards and Licensure
Program is found in the following core budget(s):

DRL Program
DCPH Program
DCPH Program
TOTAL

	DRL Program Operations	DCPH Program Operations			TOTAL
GR	959,934	0			959,934
FEDERAL	1,694,163	0			1,694,163
OTHER	81,742	1,927			83,669
TOTAL	2,735,839	1,927			2,737,766

1a. What strategic priority does this program address?

To protect health and keep the people of Missouri safe.

1b. What does this program do?

- Consists of the Bureau of Home Care and Rehabilitative Standards (HCRS), Bureau of Ambulatory Care (BAC), and the Bureau of Diagnostic Services (BDS).
- Contracted by the Centers for Medicare and Medicaid Services (CMS) to conduct inspections of Home Health Agencies, Hospice Agencies, Outpatient Physical
 Therapy (OPT) Facilities, Comprehensive Outpatient Rehabilitative Facilities (CORF), Ambulatory Surgical Centers, End Stage Renal Dialysis (ESRD) Facilities,
 Clinical Laboratory Improvement Amendments (CLIA) Labs, Rural Health Clinics, mammography equipment, and radiology equipment in order to ensure
 compliance with state and federal regulations, while providing quality care and protecting/promoting the rights of the patients receiving care.
- Identifies violations of statute or regulation that are based on the provider's performance or practices. Examples of the most common violations include:
 - · Patient Rights,
 - · Nursing Services,
 - · Organizational services, and
 - · Infection Control.
- Educates providers and the general public regarding applicable federal and state requirements.

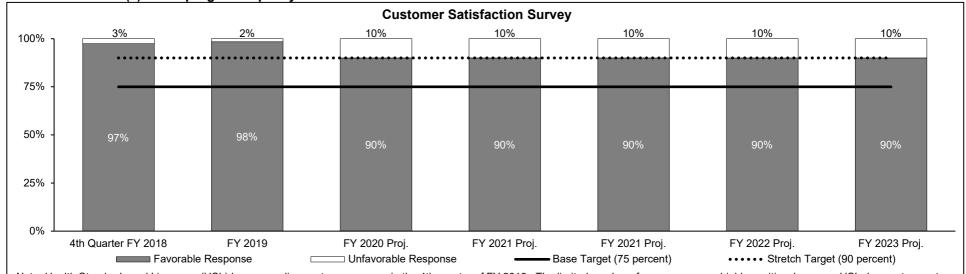
Health and Senior Services
Health Standards and Licensure
HB Section(s): 10.700, 10.900

Program is found in the following core budget(s):

2a. Provide an activity measure(s) for the program.

Agencies Regulated by Health Standards & Licensure											
Year	Home Health	Hospice	Outpatient, PT, Speech Pathology	Comp Outpatient Rehab Facilities	Ambulatory Surgical Centers	Rural Health	CLIA	ESRD	Mammo- graphy	Radiology	
FY 2018	170	115	35	2	121	361	5,727	168	177	2,074	
FY 2019	161	112	35	2	123	361	5,770	172	169	1,911	
FY 2020 Proj.	166	117	36	2	125	360	5,800	180	168	2,500	
FY 2021 Proj.	171	122	37	2	125	350	5,800	190	168	2,600	
FY 2022 Proj.	176	127	38	2	125	350	5,800	200	168	2,600	

2b. Provide a measure(s) of the program's quality.



Note: Health Standards and Licensure (HSL) began sending customer surveys in the 4th quarter of FY 2018. The limited number of responses were highly positive, however, HSL does not expect as many responses to be favorable in the future due to the nature of the work.

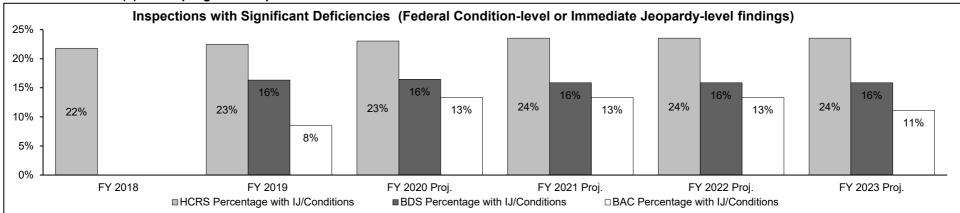
Health and Senior Services

HB Section(s): 10.700, 10.900

Health Standards and Licensure

Program is found in the following core budget(s):

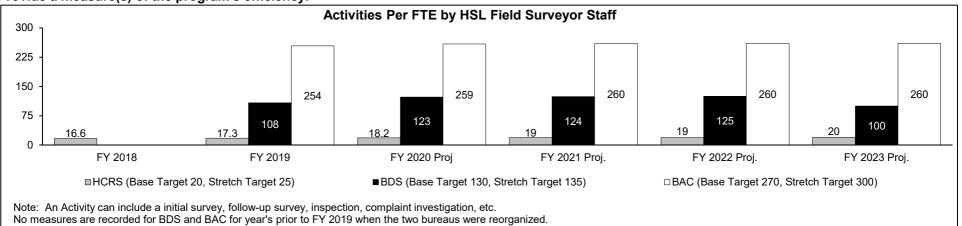
2c. Provide a measure(s) of the program's impact.



Note: Although deficiencies are evidence of impact and effectiveness of the program, HSL does not set targets or quotas. Federal Condition-level findings and Immediate Jeopardy-level findings are both considered to be significant deficiencies identified during the inspection of a health facility. Immediate Jeopardy is defined by CMS as "[a] situation in which the provider's noncompliance with one or more requirements of participation has caused, or is likely to cause, serious injury, harm, impairment, or death to a resident." Federal-Condition Level deficiencies are a facility's noncompliance with requirements that represent a severe or critical health or safety breach.

No measures are recorded for BDS and BAC for years prior to FY 2019 when the two bureaus were reorganized.

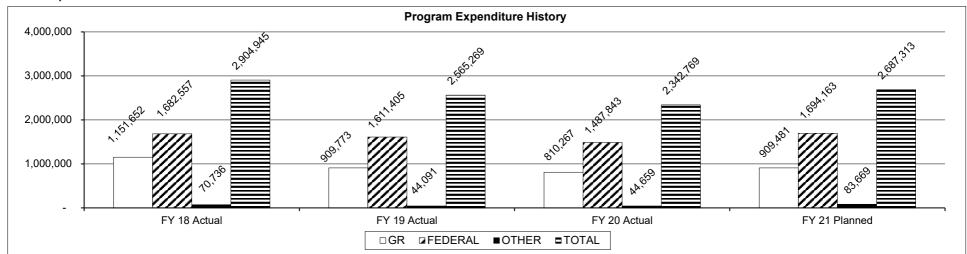
2d. Provide a measure(s) of the program's efficiency.



Health and Senior Services
Health Standards and Licensure
HB Section(s): 10.700, 10.900

Program is found in the following core budget(s):

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Mammography (0293).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Chapter 197, RSMo; Sections 1861, 1864, 1891, and 1902 of the Social Security Act; 42 CFR 484.1 to 484.260; 42 CFR 418.1 to 418.405; 42 CFR 485.701 to 485.729; and 42 CFR 485.50 to 485.74 Federal Statutory and Regulatory Citations: Section 1864 of the Social Security Act; Mammography Quality Standards Act and 21 CFR 900.1 to 900.25; 42 CFR 488.1 to 488.211; 42 CFR 416.1 to 42 CFR 416.52; Clinical Laboratory Improvement Act Amendments; 42 CFR 493.1 to 493.2001; 42 CFR 482.1 to 482.104; and 42 CFR 494.1 to 494.180.

6. Are there federal matching requirements? If yes, please explain.

Yes, the program is required to match Medicaid (Title XIX) funds at a state match rate of 50 percent.

7. Is this a federally mandated program? If yes, please explain.

Yes, the federal government has guidelines as to the frequency of surveys performed to assure compliance. Each provider type has different federal mandates for survey frequency. Complaint investigations are conducted as needed.

LID 0 - -4' - -- (-)

Health and Senior Services					HB Section(s): 10.900			
Hospital Standards								
dget(s):			-					
							TOTAL	
5							569,975	
	dget(s):					ldget(s):		

1a. What strategic priority does this program address?

To protect health and keep the people of Missouri safe.

877.910

1,447,885

0

1b. What does this program do?

Haalth and Caniar Camilaca

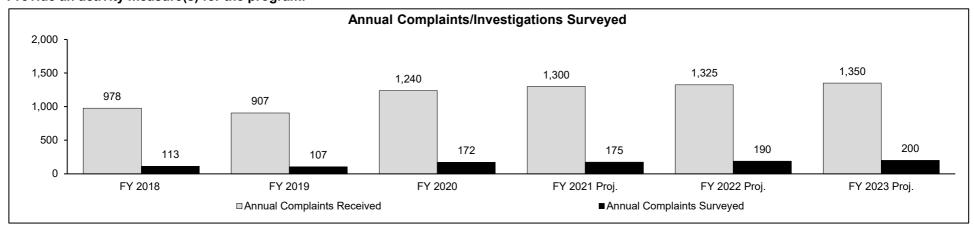
FEDERAL

OTHER

TOTAL

- Contracted by the Centers for Medicare and Medicaid Services (CMS) to conduct inspections of hospitals in order to ensure compliance with state and federal regulations, while providing quality care and protecting/promoting the rights of the patients receiving care.
- Identifies violations of the statute or regulation that are based on the provider's performance or practices. Examples of the most common violations include:
 - · Nursing services,
 - · Patient rights, and
 - · Infection control.
- Investigates all allegations of noncompliance with the regulations governing these entities.
- Educates providers and the general public regarding applicable federal and state requirements, specifically compliance with existing regulations and the promulgation of new federal regulations and requirements.

2a. Provide an activity measure(s) for the program.



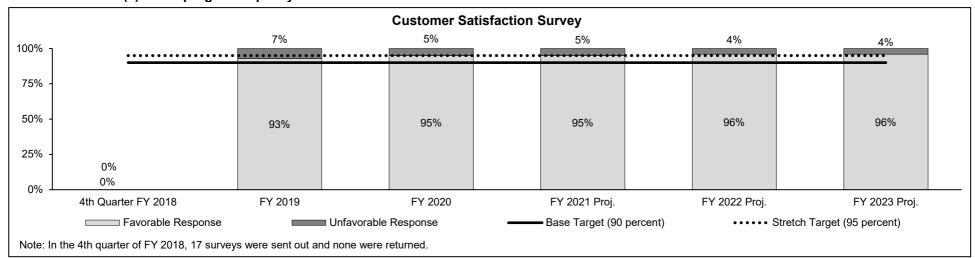
877,910

1,447,885

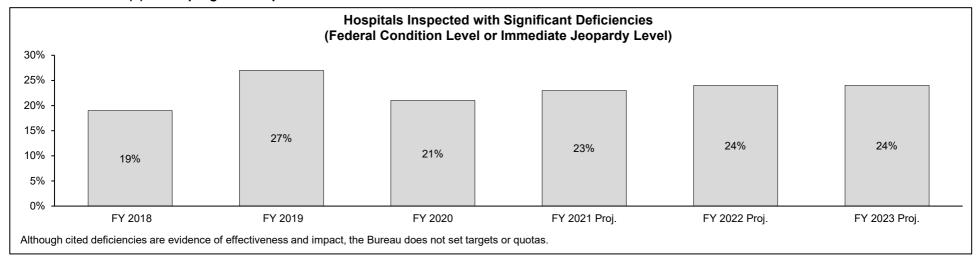
Health and Senior Services
Hospital Standards
HB Section(s): 10.900

Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality.



2c. Provide a measure(s) of the program's impact.



Health and Senior Services

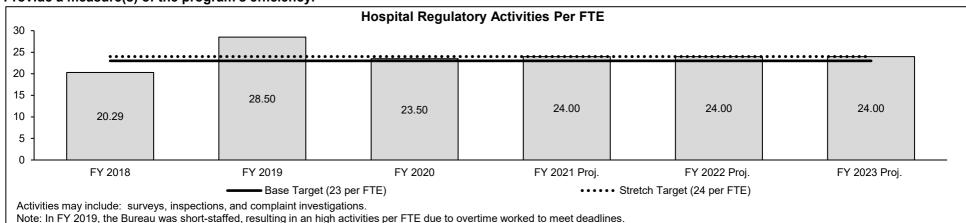
Hospital Standards

Program is found in the following core budget(s):

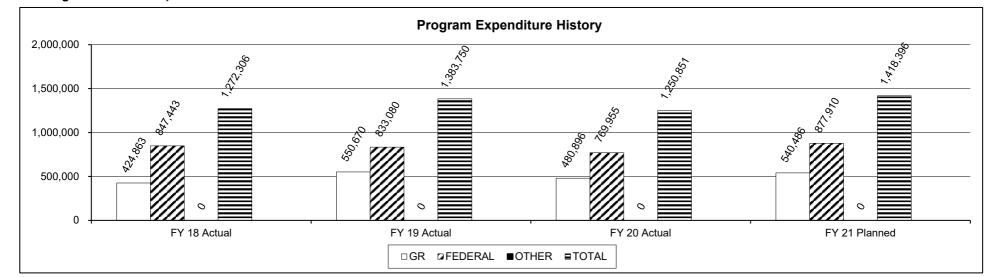
HB Section(s): 10.900

10.900

2d. Provide a measure(s) of the program's efficiency.



3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



Health and Senior Services	HB Section(s):	10.900
Hospital Standards		
Program is found in the following core budget(s):		

4. What are the sources of the "Other" funds?

Not applicable.

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 190.185 and 190.241, RSMo (TCD program); Sections 197.010 to 197.120, RSMo (hospitals); Sections 197.285 to 197.297, RSMo (operation and management of hospitals); Sections 197.700 to 197.705, RSMo (medical staffing for licensed facilities); and Sections 197.150 to 197.165 and 197.293 to 197.294, RSMo (infection control). Federal Statutory and Regulatory Citations: Section 1864 of the Social Security Act and 42 CFR 482.1 to 482.104 (hospitals).

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

Yes, the hospital regulation program is mandated, and Missouri operates under a federal agreement to perform the regulatory services required under this program.

| CORE DECISION ITEM | Health and Senior Services | Budget Unit | 58865C | | Regulation and Licensure | | Core - Time Critical Diagnosis | HB Section | 10.900 |

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 2022 Governor's Recommendation				
	GR	Federal	Other	Total		GR	Fed	Other	Total	
PS	164,688	0	0	164,688	PS	0	0	0	0	
EE	8,500	0	0	8,500	EE	0	0	0	0	
PSD	0	0	0	0	PSD	0	0	0	0	
TRF	0	0	0	0	TRF	0	0	0	0	
Total	173,188	0	0	173,188	Total	0	0	0	0	
FTE	3.00	0.00	0.00	3.00	FTE	0.00	0.00	0.00	0.00	
Est. Fringe	96,689	0	0	96,689	Est. Fringe	0	0	0	0	
l.,, -, ,							5	. ,		

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

Note: Fringes budgeted in House Bill 5 except for certain fringes budgeted directly to MoDOT, Highway Patrol, and Conservation.

2. CORE DESCRIPTION

The Time Critical Diagnosis (TCD) program is a state-only volunteer program that designates hospitals, based on tier levels, as a Trauma, Stroke, or ST Segment Elevation Myocardial Infarction (STEMI) center, that seeks to ensure that critically ill patients suffering from trauma, stroke, and certain types of heart attack (STEMI) get to hospitals that have the capacity to treat them mose effectively.

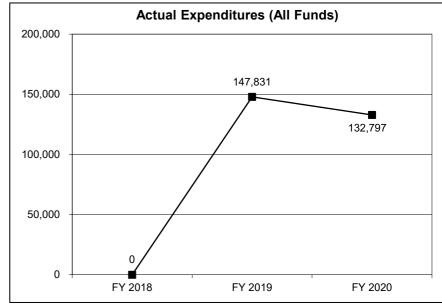
3. PROGRAM LISTING (list programs included in this core funding)

Time Critical Diagnosis

| CORE DECISION ITEM | Health and Senior Services | Budget Unit | 58865C | | Regulation and Licensure | Core - Time Critical Diagnosis | HB Section | 10.900 |

4. FINANCIAL HISTORY

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	0	153,546	168,201	173,188
Less Reverted (All Funds)	0	0	(5,046)	(5,146)
Less Restricted (All Funds)*	0	0	0	(1,679)
Budget Authority (All Funds)	0	153,546	163,155	166,363
_	0	147,831	132,797	N/A
Actual Expenditures (All Funds)	0	5,715	30,358	N/A
Unexpended (All Funds)				
Unexpended, by Fund:	0	5,715	30,358	N/A
General Revenue	0	0	0	N/A
Federal Other	0	0	0	N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: The Time Critical Diagnosis program was moved to its own budget unit in FY 2019.

^{*}Current Year restricted amount is as of 7/01/2020.

CORE RECONCILIATION DETAIL

DEPARTMENT OF HEALTH & SENIOR SERVINTIME CRITICAL DIAGNOSIS

GOVERNOR'S RECOMMENDED CORE

881,871 881,871 0 0 3.00 Total 8,500 9,500 00.0 33 0 0 889,491 0 889,491 3.00 Sd 0 **ТЕРРАКТМЕИТ СОРЕ РЕДИЕЗТ** 881,871 881,871 3.00 Total 0 0 8,500 0 0 9,500 00.0 33 889,491 0 0 889,491 3.00 Sd **ZALUES ALLO SETOES** Explanation ЭТЭ Class Total Other Federal СК Budget **5. CORE RECONCILIATION DETAIL**

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0

0

881,871

164,688

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Total

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881,871

164,688

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DECISION ITEM SUMMARY

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00.0	0	3.00	881,571	3.00	881,871	2.26	867,281	⊿A TOT
00.0	0	00.0	8,500	00.0	005,8	00.0	871,4	33 - JATOT
00.0	0	00.0	8,500	00.0	002,8	00.0	871,4	EXPENSE & EQUIPMENT GENERAL REVENUE
00.0	0	3.00	889,491	3.00	164,688	2.28	128,620	29 - JATOT
00.0	0	3.00	889,491	3.00	889,491	2.26	128,620	GENEKAL REVENUE PERSONAL SERVICES
								COKE
								TIME CRITICAL DIAGNOSIS
СОГЛИИ	СОГЛШИ	DEPT REQ FTE	DEPT REQ DOLLAR	BUDGET FTE	BOLLAR POLLAR	JAUTOA ETT	AUTOA AAJJOG	Budget Object Summary Fund

FY 2021

FY 2021

EX 2020

EX 2020

EX 2022

EX 2022

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Decision Item

Budget Unit

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SECURED

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DEPT REQ

EX 2022

DOLLAR

DEPT REQ

EX 2022

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BUDGET

FY 2021

00.0 00.0 00.0		3.00 00.0 00.0	0\$ 0\$ 881'&41\$	00.6 00.0 00.0	0\$ 0\$ 881'&11\$	2.2 00.0 00.0	0\$ 0\$ 864'381\$	GENERAL REVENUE FEDERAL FUNDS OTHER FUNDS
00.0	0\$	3.00	881,871\$	3.00	881,871\$	2.26	867,251\$	ДАТОТ ПИАЯЭ
00.0	0	00.0	009'8	00.0	009'8	00.0	871,4	EE - JATOT
00.0	0	00.0		00.0	<u>l</u>	00.0	0	THER EQUIPMENT
00.0	0	00.0	l	00.0	l	00.0	0	OFFICE EQUIPMENT
00.0	0	00.0	7 6∠	00.0	0	00.0	390	PROFESSIONAL SERVICES
00.0	0	00.0	l	00.0	l	00.0	0	COMMUNICATION SERV & SUPP
00.0	0	00.0	653	00.0	0	00.0	323	PROFESSIONAL DEVELOPMENT
00.0	0	00.0	219	00.0	2,000	00.0	301	SUPPLIES
00.0	0	0.00	1 99	00.0	0	00.0	772	TRAVEL, OUT-OF-STATE
00.0	0	0.00	₽ ∠8'S	00.0	۲6 ۴ ,6	00.0	788,2	TRAVEL, IN-STATE
00.0	0	3.00	889' 1 91	3.00	889' 1 91	2.26	128,620	89 - JATOT
00.0	0	00.1	478,7£	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM ASSOC
00.0	0	00.↑	∠ 86'69	00.0	0	00.0	0	NURSE MANAGER
00.0	0	00.↑	720,73	00.0	0	00.0	0	REGISTERED NURSE
00.0	0	00.0	0	00.0	0	00.0	0	LEAD ADMIN SUPPORT ASSISTANT
00.0	0	0.00	0	1.00	194,17	1.00	68,293	REGISTERED NURSE MANAGER B1
00.0	0	0.00	0	1.00	586,383	67.0	898,64	HEALTH FACILITIES NRSNG CNSLT
00.0	0	0.00	0	1.00	718,4E	0.00	0	II 43A MAROGRAM REP II
00.0	0	0.00	0	0.00	0	15.0	11,085	HEALTH PROGRAM REP I
0.00	0	00.0	0	00.0	72	91.0	£,374	ADMIN OFFICE SUPPORT ASSISTANT
								COKE
								TIME CRITICAL DIAGNOSIS

DOLLAR

BUDGET

FY 2021

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DOLLAR

ACTUAL

LA 5050

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Budget Object Class

Decision Item

Budget Unit

Health and Senior Services					F	IB Section(s):	10.900	
Time Critical Diagnosis			_			•		
Program is found	in the following core budg	get(s):	_					
	DRL Program Operations							TOTAL
GR	173,188							173,188
FEDERAL	0							0
OTHER	0							0
TOTAL	173,188							173,188

1a. What strategic priority does this program address?

To protect health and keep the people of Missouri safe.

1b. What does this program do?

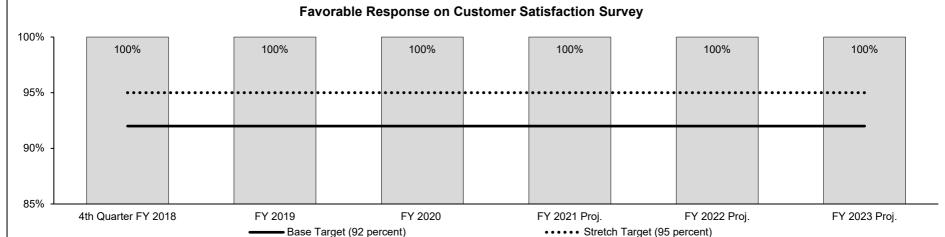
The Time Critical Diagnosis (TCD) program is a state-only volunteer program that designates hospitals, based on tier levels, as a Trauma, Stroke, or ST Segment Elevation Myocardial Infarction (STEMI) center, that seeks to ensure that critically ill patients suffering from trauma, stroke, and certain types of heart attack (STEMI) are transported to a hospital that have the capacity to treat them most effectively.

2a. Provide an activity measure(s) for the program.

Agencies Regulated by TCD						
	Trauma	Stroke	STEMI			
FY 2018	30	57	55			
FY 2019	30	65	57			
FY 2020	30	67	59			
FY 2021 Proj.	31	70	60			
FY 2022 Proj.	31	70	61			
FY 2023 Proj.	31	70	61			

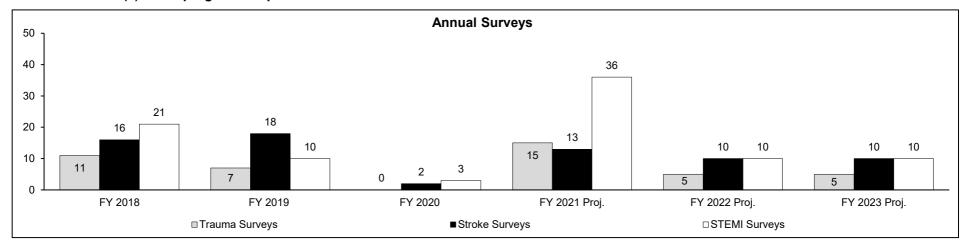
Health and Senior Services	HB Section(s):10.900
Time Critical Diagnosis	
Program is found in the following core budget(s):	

2b. Provide a measure(s) of the program's quality.



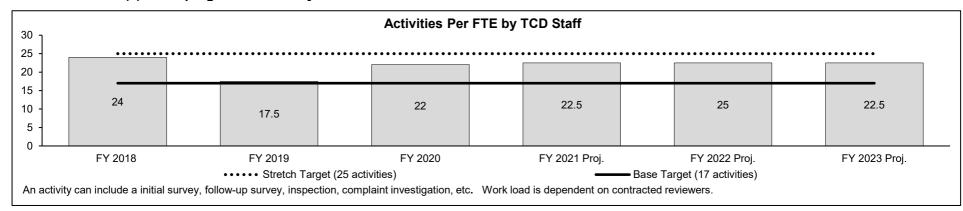
Note: Time Critical Diagnosis (TCD) began sending customer surveys in the 4th quarter of FY 2018 the limited number of responses were highly positive, however, TCD does not expect as many responses to be favorable in the future due to the nature of the work.

2c. Provide a measure(s) of the program's impact.

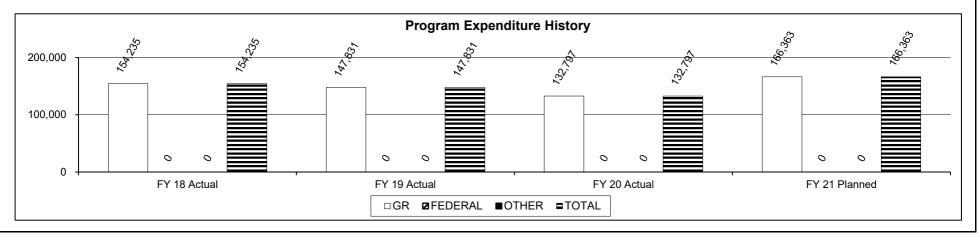


Health and Senior Services	HB Section(s):10.900
Time Critical Diagnosis	
Program is found in the following core budget(s):	

2d. Provide a measure(s) of the program's efficiency.



3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



H	ealth and Senior Services HB Section(s): 10.900
Ti	me Critical Diagnosis
Pı	ogram is found in the following core budget(s):
4.	What are the sources of the "Other" funds?
	Not applicable.
5.	What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)
	Sections 190.185 and 190.241, RSMo.
6.	Are there federal matching requirements? If yes, please explain.
	No.
7.	Is this a federally mandated program? If yes, please explain.
	No.

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58630C
Regulation and Licensure		
Core - Child Care Improvement Program	HB Section	10.905

CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 202	2 Governor's	Recommendat	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	0	436,675	0	436,675	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	0	436,675	0	436,675	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes bu	dgeted in House	Bill 5 except for	r certain fringes	budgeted	Note: Fringes b	oudgeted in Hous	se Bill 5 except	for certain fring	es budgeted
dive attente Mano	T I liada wax Datus	I and Canaania	-ti		dive attente Ma Di	OT Historia Dot	wal and Canaa	m ration	_

directly to MoDOT, Highway Patrol, and Conservation.

Idirectly to MoDOT, Highway Patrol, and Conservation.

CORE DESCRIPTION

The core funding is requested for inclusion services to assist providers and families of children with special needs. The Section for Child Care Regulation promotes inclusive child care services for families and children with special needs by providing contract funding for inclusion services. These services include providing child care referrals to families of children with special needs, collaborating with child care providers to create new or convert existing child care openings for children with special needs, online and in-person training for child care providers, and on-site technical assistance when requested by parents or providers. Child care providers are also trained in an inclusion curriculum that teaches practical strategies, as well as additional inclusion training sessions based on the surveyed needs of providers.

The availability of quality child care affects workplace productivity and is linked to increased school success, crime reduction, and a stronger economy. When a family must take off work or leave employment to care for their children, many are affected. Inclusion services support the increasing need of children with behavioral concerns. Inclusion specialists work with child care providers to develop strategies for the child with a goal of maintaining the child's placement in the program. This contract funding helps support an important industry comprised of thousands of small businesses in Missouri. Families of children with special needs are part of Missouri's workforce and can remain productive employees when quality child care is available and maintained.

PROGRAM LISTING (list programs included in this core funding)

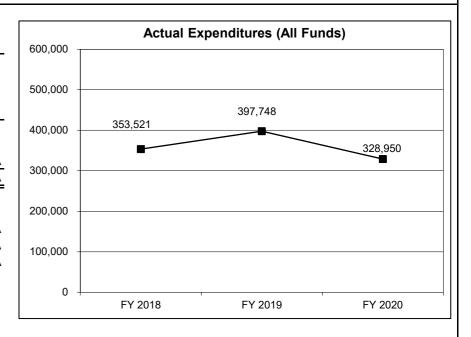
Child Care

CORE DECISION ITEM

| Health and Senior Services | Budget Unit | 58630C |
| Regulation and Licensure | Core - Child Care Improvement Program | HB Section | 10.905 |

4. FINANCIAL HISTORY

	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
-				
Appropriation (All Funds)	436,675	436,675	436,675	436,675
Less Reverted (All Funds)	0	0	0	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	436,675	436,675	436,675	436,675
	353,521	397,748	328,950	N/A
Actual Expenditures (All Funds)	83,154	38,927	107,725	N/A
Unexpended (All Funds)				
Unexpended, by Fund:	0	0	0	N/A
General Revenue	83,154	38,927	107,725	N/A
Federal Other	0	0	0	N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

CORE RECONCILIATION DETAIL

CHILD CARE IMPROVEMENT PRGM

	919 °9€	0	9 ∠ 9'9£ 7	0	00.0	Total	
	436,675	0	436,675	0	00.0		
						ORE	COVERNOR'S RECOMMENDED C
	<u>979,854</u>	0	436,675	0	00.0	IstoT	
	436,675	0	436,675	0	00.0		
							DEPARTMENT CORE REQUEST
	9 4 9675	0	436,675	0	00.0	IstoT	
	436,675	0	436,675	0	00.0	DD	
							TAFP AFTER VETOES
noitsna	lqx∃ lstoT	Other	Federal	ев	3T4	Budget Class	•
						7	5. CORE RECONCILIATION DETAI

DECISION ITEM SUMMARY

								COKE
								CHILD CARE IMPROVEMENT PRGM
СОГЛШИ	СОГЛШИ	3T7	ВОГГАВ	3T7	DOLLAR	3T7	DOLLAR	Pun∃
SECURED	SECURED	DEPT REQ	рерт кед	BUDGET	BUDGET	ACTUAL	AUTOA	Budget Object Summary
*****	*****	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Decision Item
								Budget Unit

ЛАТОТ ПОТАГО	\$328,950	00.0	949675	00.0	949'987\$	00.0	0\$	00.0
⊿ ATOT	328,950	00.0	378,8£ 4	00.0	949645	00.0	0	00.0
Q9 - JATOT	358,950	00.0	 GZ9'9E†	00.0	G78,854	00.0	0	00.0
PROGRAM-SPECIFIC DHSS-FEDERAL AND OTHER FUNDS	328,950	00.0	919,854	00.0	G78,854	00.0	0	00.0
COKE								

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0\$

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00.0 00.0		00.0 00.0	949'98 1 9	00.0 00.0	949'98 7 \$ 0\$	00.0 00.0	096'87£\$ 0\$	GENERAL REVENUE FEDERAL FUNDS
00.0	0\$	00.0	9 4 99942	00.0	\$436,675	00.0	4328,950	DATOT GRAND
00.0	0	00.0	9 49 °987	00.0	9 4 96,875	00.0	328,950	G9 - JATOT
00.0	0	00.0	919,675	00.0	919,954	00.0	328,950	PROGRAM DISTRIBUTIONS
								СОВЕ
								CHILD CARE IMPROVEMENT PRGM
СОГЛШИ	СОГЛШИ	ЭТЯ	DOLLAR	3T7	DOLLAR	ЭТЯ	DOLLAR	Budget Object Class
SECURED	SECNKED	DEPT REQ	DEPT REQ	BUDGET	BUDGET	JAUTDA	AUTOA	Decision Item
*******	*****	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit

00.0

0\$

OTHER FUNDS

0\$

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00.0

Health and Senior	r Services		HB Section(s):	10.900, 10.90	5
Child Care					_
Program is found	in the following core bud	lget(s):			
	DRL Program Operations	Child Care Improvement Program			TOTAL
GR	1,455,930	0			1,455,930
FEDERAL	1,925,336	436,675			2,362,011
OTHER	0	0			0
TOTAL	3,381,266	436,675			3,817,941

1a. What strategic priority does this program address?

To protect health and keep the people of Missouri safe.

1b. What does this program do?

- Conducts inspections in licensed child care programs, nursery schools, and child care programs operated by religious organizations to determine compliance with regulations and statutes. The rules provide minimum health and safety requirements in areas such as staffing, including staff/child ratios, medical and background screenings for staff, supervision of children, physical plant and equipment, nutrition, transportation, and recordkeeping.
- Conducts complaint investigations to determine compliance with statutes and regulations.
 - High Priority Complaints contain allegations that place children at immediate risk of serious harm. Examples include:
 - · allegations of child abuse/neglect that indicates an immediate danger of death or serious injury and
 - allegations of a serious physical injury that requires medical attention.
 - Medium Priority Complaints contain allegations that are serious in nature, but do not place children at immediate risk of serious harm. Examples include:
 - serious environmental/physical hazards;
 - · unsanitary conditions; and
 - transporting children without appropriate safety restraints.
 - Low Priority Complaints contain allegations of a regulation or statute violation that involve a low risk to children. Examples include:
 - · recordkeeping violations;
 - failure to serve all components of a meal as required; and
 - insufficient materials for the children in care.
- Processes comprehensive background screenings for child care staff in licensed child care programs.
- Coordinates annual fire safety inspections and sanitation inspections conducted by the State of Missouri.
- Approves required yearly licensed child care provider training in topics such as child development, emergency preparedness, safe sleep, etc.

Health and Senior Services

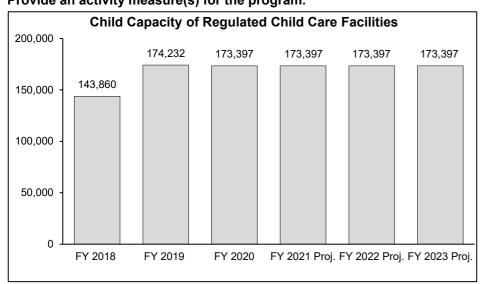
Child Care

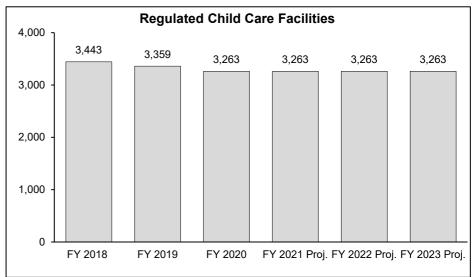
Child Care

HB Section(s): 10.900, 10.905

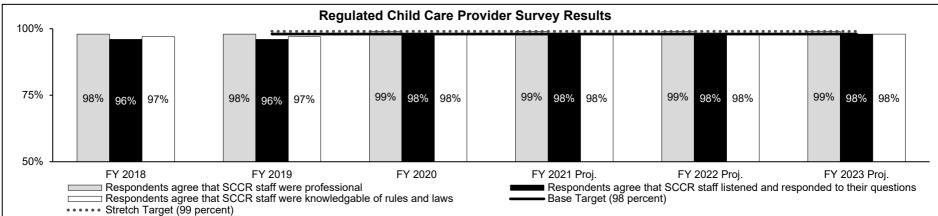
Program is found in the following core budget(s):

2a. Provide an activity measure(s) for the program.



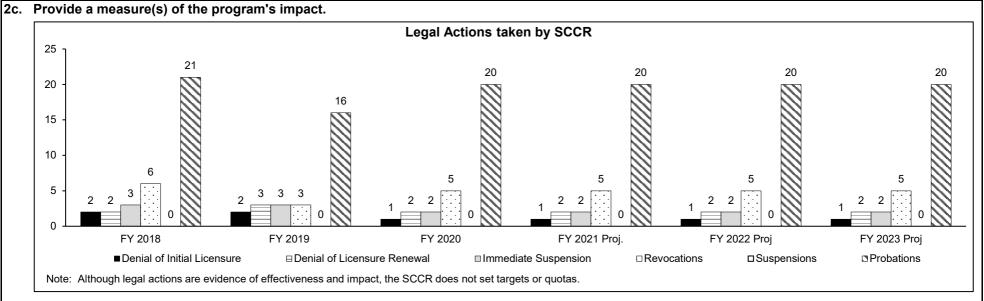


2b. Provide a measure(s) of the program's quality.

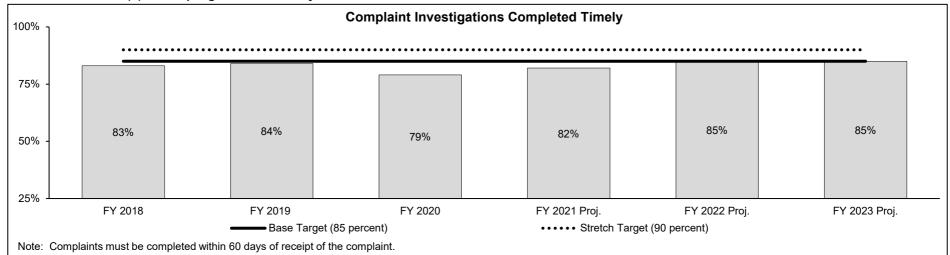


Note: The Section of Child Care Regulation (SCCR) began collecting customer satisfaction data in the last quarter of FY 2018, the limited number of responses were highly positive, however, SCCR does not expect all responses to be favorable in the future due to the nature of the work.

Health and Senior Services	HB Section(s):	10.900, 10.905	
Child Care			
Program is found in the following core budget(s):			

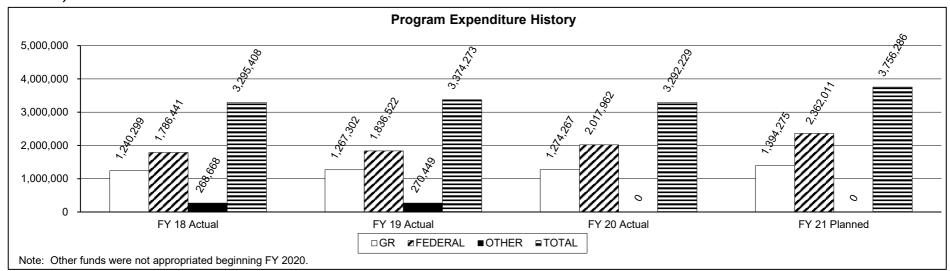


2d. Provide a measure(s) of the program's efficiency.



Health and Senior Services	HB Section(s):	10.900, 10.905	
Child Care			
Program is found in the following core budget(s):			

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

Not applicable.

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Sections 210.199 to 210.275, RSMo; 45 CFR 98.40, 98.41 and 98.51.

6. Are there federal matching requirements? If yes, please explain.

Yes. Funding for the inclusion program is provided through the Maternal and Child Health (MCH) Block Grant, which is matched at the department level.

7. Is this a federally mandated program? If yes, please explain.

No. However, the SCCR receives federal Child Care Development Fund (CCDF) monies from the Department of Social Services (DSS) through a memorandum of understanding in order to improve the quality and availability of safe and healthy child care. DSS is the lead agency in Missouri for CCDF funding from the federal government. A minimum of seven percent of the CCDF funds must be used to improve the quality of child care.

CORE DECISION ITEM

Health and Senior Services

Regulation and Licensure

Core - Section for Medical Marijuana Regulation

Budget Unit 58860C

HB Section 10.900

1. CORE FINANCIAL SUMMARY

		FY 2022 Budg	et Request			FY 202	2 Governor's	Recommendat	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	4,089,591	4,089,591	PS	0	0	0	0
EE	0	0	4,617,905	4,617,905	EE	0	0	0	0
PSD	0	0	4,835,820	4,835,820	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	0	0	13,543,316	13,543,316	Total	0	0	0	0
FTE	0.00	0.00	52.00	52.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	2,084,969	2,084,969	Est. Fringe	0	0	0	0
Note: Fringes bu	udgeted in House	Bill 5 except fo	r certain fringes	s budgeted	Note: Fringes bu	udgeted in Hous	se Bill 5 except	for certain fring	es budgeted
directly to MoDO	T, Highway Patro	l, and Conserv	ation.		directly to MoDO	T, Highway Pat	rol, and Conse	rvation.	

Other Funds: Veterans Health and Care (0606).

2. CORE DESCRIPTION

The Section for Medical Marijuana Regulation enhances access to care for Missourians with qualifying conditions by accepting and processing patient and caregiver applications and annual renewals for Medical Marijuana Identification cards. In addition, the Section also accepts, processes, and awards facility licenses and certifications and conducts compliance inspections of licensed and certified facilities in order to enhance Missourian's access to care as authorizied under Article XIV of the Missouri Constitution and associated rules 19 CSR 30-95.010 to 19 CSR 30-95.110. All funds received from application fees are depostied into the Veteran Health and Care Fund.

3. PROGRAM LISTING (list programs included in this core funding)

Section for Medical Marijuana Regulation

CORE DECISION ITEM

Health and Senior Services Budget Unit 58860C

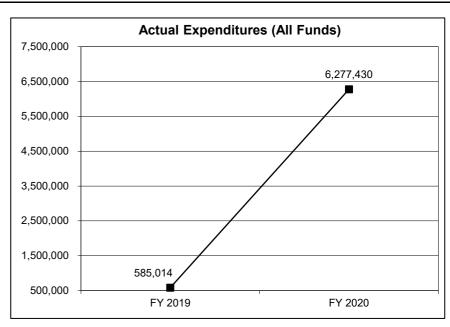
Regulation and Licensure

Core - Section for Medical Marijuana Regulation

HB Section

4. FINANCIAL HISTORY

_	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	0	3,161,975	13,311,557	13,543,316
Less Reverted (All Funds)	0	0	0	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	0	3,161,975	13,311,557	13,543,316
Actual Expenditures (All Funds)	0	585,014	6,277,430	N/A
Unexpended (All Funds)	0	2,576,961	7,034,127	N/A
Unexpended, by Fund: General Revenue Federal Other	0 0 0	0 0 2,576,961	0 0 7,034,127	N/A N/A N/A



10.900

Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: The Section for Medical Marijuana Regulation began operations in December 2018.

CORE RECONCILIATION DETAIL

MEDICAL MARIJUANA

5. CORE RECONCILIATION DETAIL

	–			•	-			
		00.0		0	0	4,835,820	7,835,820	<u>-</u>
	33	00.0		0	0	906,718,4	306,716,4	9
	Sd	92.00		0	0	169'680'₺	l69'680'⊅	
GOVERNOR'S RECOMMENDED (CORE							
	Total	52.00		0	0	13,543,316	13,543,316	= !
		00.0		0	0	4,835,820	7,835,820	Ī
	33	00.0		0	0	906,718,4	306,716,4	9
	Sd	52.00		0	0	169'680'7	l69'680'⊅	
ТЄЗОВЕ ВЕДОЕЗТ								
	IstoT	62.00		0	0	13,543,316	13,543,316	= (
		00.0		0	0	4,835,820	7,835,820	-
	33	00.0		0	0	906'∠≀9'₺	906,716,4	9
	Sd	52.00		0	0	₽63,680,4	l69'680'⊅	
SAOTAV AATAA 94AT								
	Budget Class	3T4	ЯЭ	Feder		Other	IstoT	noitsnslqx3

52.00

Total

915,543,316 13,543,316

DECISION ITEM SUMMARY

2ECNKED

DEPT REQ

EX 2022

DEPT REQ

EX 2022

BUDGET

FY 2021

SECNKED

00.0	0\$	67.00	919'069'81\$	62.00	918'843'818	36.03	0£7,772,8	JATOT UNA 9
00.0	0	00.3	008,741	00.0	0	00.0	0	JATOT
00.0	0	00.0	00£,74r	00.0	0	00.0	0	33 - JATOT
00.0	0	00.0	147,300	00.0	0	00.0	0	EXPENSE & EQUIPMENT VET HEALTH AND CARE FUND
00.0	0	00.3	0	00.0	0	00.0	0	29 - JATOT
00.0	0	00.8	0	00.0	0	00.0	0	PERSONAL SERVICES VET HEALTH AND CARE FUND
								Medical Marijuana - 1580007
00.0	0	62.00	13,543,316	62.00	918,543,816	36.03	0£7,772,8	JATOT
00.0	0	00.0	4,835,820	00.0	4,835,820	00.0	940,8	Q9 - JATOT
00.0	0	00.0	4,835,820	00.0	4,835,820	00.0	3,046	PROGRAM-SPECIFIC VET HEALTH AND CARE FUND
00.0	0	00.0	906,718,4	0.00	906'ՀԼ9'৳	00.0	4,372,558	∃∃ - JATOT
00.0	0	00.0	906,718,4	00.0	906,719,4	00.0	4,372,558	EXPENSE & EQUIPMENT VET HEALTH AND CARE FUND
00.0	0	52.00	₽69,680,4	52.00	169'680' 1	80.88	1,902,126	29 - JATOT
00.0	0	52.00	169'680'7	62.00	169'680'7	36.03	1,902,126	PERSONAL SERVICES VET HEALTH AND CARE FUND
								СОКЕ
								MEDICAL MARIJUANA
СОГЛШИ	СОГЛШИ	3T-1	DOLLAR	3T7	DOLLAR	3T-1	DOLLAR	Fund

BUDGET

FY 2021

AUTDA

EX 2020

AUTDA

EX 2020

Budget Object Summary

Decision Item

Budget Unit

FLEXIBILITY REQUEST FORM

BUDGET UNIT NUMBER: 58860C BUDGET UNIT NAME: Medical Marijuana		DEPARTMENT: Department of Health and Senior Services				
HOUSE BILL SECTION: 10.900		DIVISION: Division	of Regulation and Licensure			
 Provide the amount by fund of personal s requesting in dollar and percentage terms a provide the amount by fund of flexibility you 	nd explain why the flexibil	ity is needed. If fle	expense and equipment flexibility you are exibility is being requested among divisions, ms and explain why the flexibility is needed.			
	DEPARTME	NT REQUEST				
The department requests continuation of ten percent	(10%) flexibility between perso	onal services and expe	ense and equipment granted by the legislature in FY 2021.			
2. Estimate how much flexibility will be use Year Budget? Please specify the amount.	d for the budget year. How	w much flexibility v	was used in the Prior Year Budget and the Current			
	CURRENT Y	EAR	BUDGET REQUEST			
PRIOR YEAR	ESTIMATED AMO		ESTIMATED AMOUNT OF			
ACTUAL AMOUNT OF FLEXIBILITY USED	FLEXIBILITY THAT W	ILL BE USED	FLEXIBILITY THAT WILL BE USED			
\$0	HB 10.900 language allows up flexibility between personal ser and equipment.	vices and expense	Expenditures will differ annually based on needs to cover operational expenses, address emergency and changing situations, etc. In addition, the level of governor's reserve, restrictions, and core reductions impact how the flexibility will be used, if at all. The department's requested flex will allow the department to utilize available resources in the most effective manner as the need arises. The department cannot predict how much flexibility will be utilized.			
3. Please explain how flexibility was used in the	prior and/or current years.					
PRIOR YEAR EXPLAIN ACTUAL US	E	CURRENT YEAR EXPLAIN PLANNED USE				
Not applicable.		Not applicable.				

SECURED

SECURED

DEPT REQ

EX 2022

DOLLAR рерт кед

EX 2022

00.0 00.0	0 0	00.1 00.8	613,741 803,47	00.1 00.0	0 818'69	00.0 ع.00	0 8£8'09	SPECIAL ASST OFFICE & CLERICAL LEAD ADMIN SUPPORT ASSISTANT
00.0	0	١.00	803,47	00.1	515,93	1.05	888,09	SPECIAL ASST OFFICE & CLERICAL
00.0	0	00.8	583,246	00.9	1,067,429	66.9	181,304	SPECIAL ASST PROFESSIONAL
00.0	0	00.0	0	00.0	0	₽ 0.0	3,082	DATA PROCESSING MANAGER
00.0	0	00.0	0	00.0	0	10.0	291,1	SENIOR COUNSEL
00.0	0	00.0	0	00.0	0	12.0	52,139	CHIEE CONNSET
00.0	0	4.00	911,798	4.00	322,400	4.35	326,627	FEC∀F CONNSEF
00.0	0	00.0	0	00.0	0	₽ 7.0	36,123	PROJECT SPECIALIST
00.0	0	00.0	0	00.0	688,4	00.0	0	HEALTH & SENIOR SVCS MANAGER 3
0.00	0	00.0	0	00.1	000,08	29.1	120,482	HEALTH & SENIOR SVCS MANAGER 1
00.0	0	00.0	0	00.0	0	20.0	۷04,۱	LABORATORY MGR B1
0.00	0	00.0	0	4.00	394,000	96.0	697,69	INVESTIGATION MGR B1
00.0	0	00.0	0	14.00	4/050,1	2.26	124,128	III AOTAƏITSƏVNI
00.0	0	00.0	0	00.0	0	62.0	69†'0l	INVESTIGATOR I
0.00	0	00.0	0	00.0	0	60.03	019'1	GEOGRAPHIC INFO SYS SPECIALIST
00.0	0	00.0	0	1.00	68 9 ' <i>LL</i>	85.0	22,500	HEALTH PROGRAM REP III
00.0	0	00.0	0	4.00	375,528	01.3	774,00 <u>2</u>	II 937 MAROGRA HTJA3H
00.0	0	00.0	0	10.00	971,682	£7.3	209,213	I 43A MAAJOA4 HTJA3H
00.0	0	00.0	0	00.1	090'601	68.0	184,82	PLANNER IV
00.0	0	00.0	0	00.0	0	69.0	38,325	PLANNER III
00.0	0	00.0	0	00.1	014,04	94.0	197,45	PLANNER II
00.0	0	00.0	0	00.1	43,000	78.0	672,7 <i>E</i>	TRAINING TECH II
00.0	0	00.0	0	00.1	719 ['] 09	00.0	0	RESEARCH ANAL III
00.0	0	00.0	0	00.0	0	88.0	£81,04	KESEARCH ANAL II
0.00	0	00.0	0	00.0	0	70.0	270'9	INFORMATION TECHNOLOGY SPEC II
0.00	0	00.0	0	00.0	0	0.03	2,070	INFORMATION TECHNOLOGY SPEC I
00.0	0	00.0	0	00.0	0	00.0	8	INFORMATION TECHNOLOGIST I
00.0	0	00.0	0	3.00	۶۱8,671	2.70	76Z'70l	ADMIN OFFICE SUPPORT ASSISTANT
								СОКЕ
								MEDICAL MARIJUANA
СОГЛШИ	СОГЛШИ	FTE	DOLLAR	314	DOLLAR	317	DOLLAR	Budget Object Class

BUDGET

FY 2021

ACTUAL

LA 5050

ACTUAL

LA 5050

Decision Item

Budget Unit

BUDGET

FY 2021

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		a						
*****	******	FY 2022	FY 2022	FY 2021	FY 2021	FY 2020	FY 2020	Budget Unit
SECNBED	SECURED	DEPT REQ	рерт кед	BUDGET	BUDGET	AUTDA	AUTDA	Decision Item
СОГЛШИ	СОГЛШИ	3T4	ВОГГАВ	3T7	DOLLAR	3 T4	ВОГГАВ	Budget Object Class
								MEDICAL MARIJUANA
								СОВЕ
00.0	0	00.1	108,301	00.0	0	00.0	0	STAFF DEV TRAINING SPECIALIST
00.0	0	12.00	609'989	0.00	0	00.0	0	PUBLIC HEALTH PROGRAM ASSOC
00.0	0	00.0	0	00.0	0	00.00	0	PUBLIC HEALTH PROGRAM SPEC
00.0	0	00.1	601,73	00.0	0	00.0	0	NON-COMMISSIONED INVESTIGATOR
00 0	U	00 67	001 031 1	00 0	U	00 0	U	90191911111111111111111111111111111111

00.0	0	00.0	0	00.0	0	00.0	5,746	DEBT SERVICE
00.0	0	0.00	4,835,820	00.0	4,835,820	00.0	0	SNOITUBIATZIO MAAJOOA9
00.0	0	00.0	906'419' 7	00.0	906,718,4	00.0	899,27£, ₽	33 - JATOT
00.0	0	00.0	2,790	00.0	0	00.0	79t'l	WISCELLANEOUS EXPENSES
00.0	0	0.00	696,49	00.0	103,500	00.0	729,S4	BUILDING LEASE PAYMENTS
00.0	0	0.00	20,000	00.0	20,000	00.0	711¢	OTHER EQUIPMENT
00.0	0	0.00	728,824	00.0	260,824	00.0	0	OFFICE EQUIPMENT
00.0	0	0.00	£6£,14	00.0	£6£,14	00.0	0	MOTORIZED EQUIPMENT
00.0	0	0.00	872,003	00.0	333,458	00.0	333,T8	СОМРИТЕК ЕДИІРМЕИТ
00.0	0	0.00	3,109	00.0	609'l	00.0	394,802	M&R SERVICES
00.0	0	0.00	000,01	00.0	8,625	00.0	£96'£	HOUSEKEEPING & JANITORIAL SERV
00.0	0	0.00	3,000,275	00.0	2,563,000	00.0	006,798,8	PROFESSIONAL SERVICES
00.0	0	0.00	۲ ۱ ﻪ , 2 ۲	00.0	008,78	00.0	919,81	COMMUNICATION SERV & SUPP
00.0	0	0.00	8,385	00.0	ا'200	00.0	104,4	PROFESSIONAL DEVELOPMENT
00.0	0	0.00	438,720	00.0	323,940	00.0	815,77	SUPPLIES
00.0	0	0.00	1۲,300	00.0	009'11	00.0	4,462	FUEL & UTILITIES
00.0	0	0.00	9 7 9'61	00.0	12,000	00.0	116,01	TRAVEL, OUT-OF-STATE
00.0	0	0.00	133,410	00.0	997,218	00.0	970'9	TRAVEL, IN-STATE
00.0	0	52.00	163,680,4	52.00	₽63,680,4	36.03	1,902,126	29 - JATOT
00.0	0	2.00	094,891	00.0	0	00.0	0	REGULATORY COMPLIANCE MANAGER
00.0	0	4.00	878,988	00.0	0	00.0	0	COMPLIANCE INSPECTION SPV
00.0	0	13.00	1,462,122	00.0	0	00.0	0	COMPLIANCE INSPECTOR
00.0	0	00.1	601,73	00.0	0	00.0	0	NON-COMMISSIONED INVESTIGATOR
00.0	0	0.00	0	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM SPEC
00.0	0	12.00	609'989	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM ASSOC
00.0	0	۱.00	108,38	00.0	0	00.0	0	STAFF DEV TRAINING SPECIALIST
								71/0

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9/21/20 10:39 establio_mi

00.0 00.0 00.0		0.00 0.00 52.00	915,542,51 \$ 0 \$ 0\$	0.00 0.00 00.23	912'279'21\$ 0\$ 0\$	00.0 00.0 60.38	0\$ 0\$ 0\$	GENERAL REVENUE FEDERAL FUNDS OTHER FUNDS	
00.0	0\$	62.00	\$15,543,316	62.00	918,543,316	36.03	087,772,0\$		ДАТОТ ПИАЯ
00.0	0	00.0	4,835,820	00.0	4,835,820	00.0	970'E		Q9 - JATOT
00.0	0	00.0	0	00.0	0	00.0	300	_	REFUNDS
									СОВЕ
									MEDICAL MARIJUANA
СОГЛШИ	СОГЛШИ	3T7	DOLLAR	3T7	DOLLAR	3T7	DOLLAR		Budget Object Class
SECURED	SECNEED	DEPT REQ	рерт вед	BUDGET	BUDGET	AUTOA	AUTOA		Decision Item
*******	******	FY 2022	FY 2022	FY 2021	FY 2021	E A 5050	E 人 5050		Budget Unit

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Department of He	HB Section(s): 10.900, 10.910								
Section for Medic	<u> </u>								
Program is found	I in the following core bud								
	Section for Medical								
	Marijuana Regulation								TOTAL
GR	0								0
FEDERAL	0								0
OTHER	15,678,826								15,678,826
TOTAL	15,678,826								15,678,826

1a. What strategic priority does this program address?

To protect health and keep the people of Missouri safe and enhance access to care.

1b. What does this program do?

The Section for Medical Marijuana Regulation administers the Missouri Medical Marijuana Regulatory Program to ensure the availability of, and safe access to, medical marijuana for all qualifying patients. The program includes the following units: Patient Services, Facility License and Compliance, and Operations.

The program performs such duties as:

- Processing patient and caregiver applications, annual renewals for Medical Marijuana Identification cards, and facility agent ID cards.
- Processing facility variance, waiver requests, facility complaints, and edible product, package, and label applications.
- Issuing medical marijuana facility licenses and certifications.
- Educating patients, caregivers, and licensed facilities on rules, regulations, and compliance.
- Auditing and investigating patient/physician certification violations.
- Annual inspection of patient cultivation and investigation of patient cultivation complaints.
- Seed-to-sale tracking, facility inspections, compliance monitoring, and violation issuance and resolution.
- Strategic budgetary oversight, conducting internal and external training, and customer satisfaction surveys.
- Developing performance metrics and public education material.
- Contract management, program evaluation, and annual reporting.

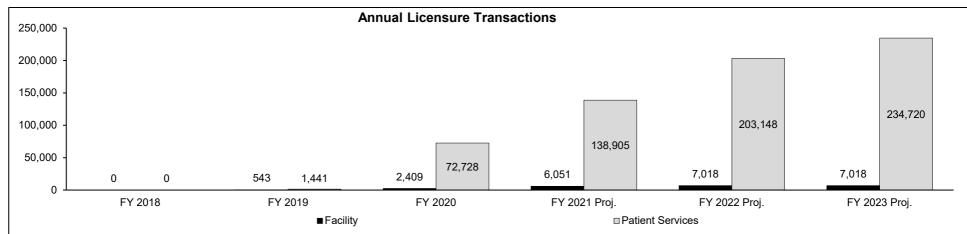
Department of Health and Senior Services

Section for Medical Marijuana Regulation

Program is found in the following core budget(s):

HB Section(s): 10.900, 10.910

2a. Provide an activity measure(s) for the program.



Note: The department began accepting facility pre-file applications in January 2019. Patient, caregiver, and patient cultivation applications were accepted starting on June 28, 2019. Pre-file period for facility applications with open application period occurring in August 2020.

Applications Processed by Type									
Licensure Type	FY 2019	FY 2020	FY 2021 Proj.	FY 2022 Proj.	FY 2023 Proj.				
Cultivation Facility*	157	582	60	60	60				
Dispensary Facility*	301	1,219	192	192	192				
Manufacturing Facility*	85	430	86	86	86				
Laboratory Testing Facility*	0	17	11	11	11				
Agent Identification Card	0	64	5,568	6,550	6,550				
Seed-to-Sale Certification	0	17	60	60	60				
Transportation Certification	0	30	50	50	50				
Change Requests	0	54	25	10	10				
Patient Identification Card**	949	57,906	106,522	155,788	180,000				
Caregiver Identification Card	2	1,988	3,622	5,297	6,120				
Patient Cultivator Identification Card	490	15,834	28,761	42,063	48,600				

^{*}Article XIV and associated rules limits the number of facility licenses issued. Ideally, the maximum number, by cap, will be annually renewed.

^{**}The department predicted an adoption rate of 160,000 to 180,000 patient identification cards issued within the first five years.

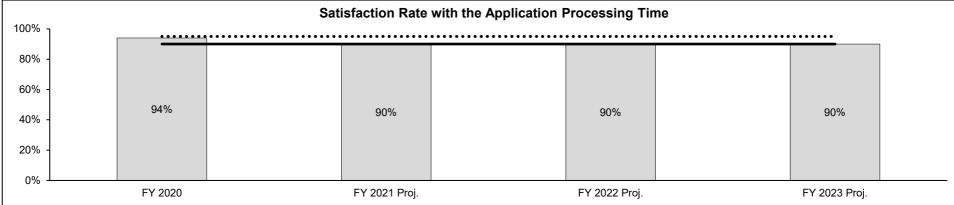
HB Section(s): 10.900, 10.910

Department of Health and Senior Services

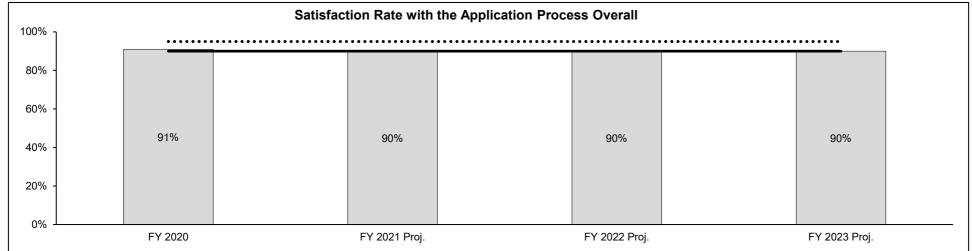
Section for Medical Marijuana Regulation

Program is found in the following core budget(s):

2b. Provide a measure(s) of the program's quality. Customer satisfaction survey of the application process.



Note: The department surveyed 7,190 patient and caregiver applicants in FY 2020, which included both approved and denied applications, and represented 12 percent of received applications.



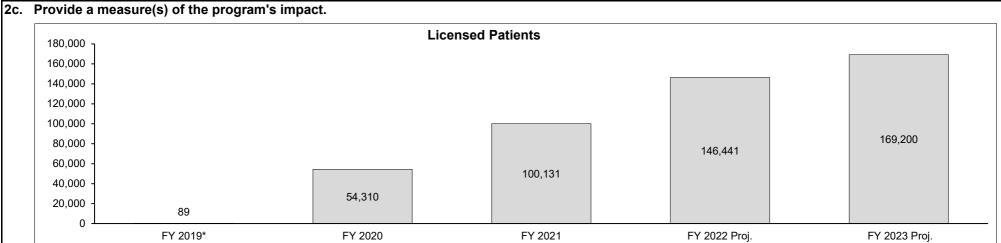
Note: The department surveyed 7,190 patient and caregiver applicants in FY 2020, which included both approved and denied applications, and represented 12 percent of received applications.

Department of Health and Senior Services

Section for Medical Marijuana Regulation

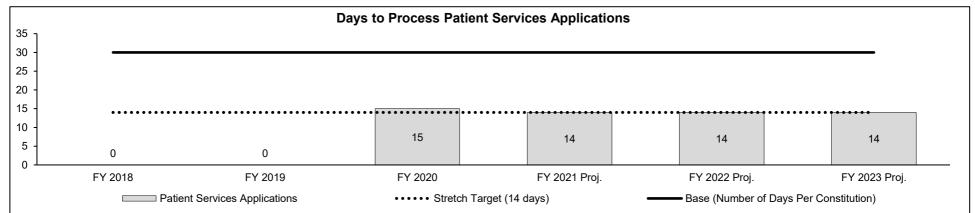
HB Section(s): 10.900, 10.910

Program is found in the following core budget(s):



*The program began issuing patient licenses on June 28, 2019. FY 2020: Approximately 94 percent of patient applications were granted licensure.

2d. Provide a measure(s) of the program's efficiency.



By rule, the program has 30 days to approve or deny a patient or caregiver application. This time frame applies to only complete applications. Applications, which are returned to the applicant, for correction and never resubmitted, are not included in this dataset. During FY 2019, the program began accepting patient and caregiver applications on June 28, 2019, which was the last business day of the fiscal year.

Department of Health and Senior Services

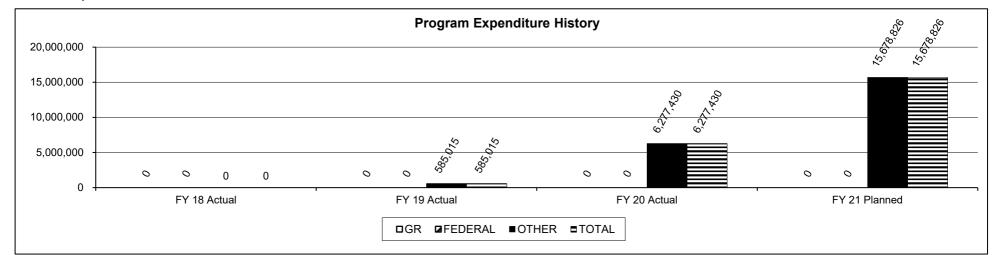
Section for Medical Marijuana Regulation

Program is found in the following core budget(s):

HB Section(s): 10.900, 10.910

10.900, 10.910

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other" funds?

Missouri Veterans Health and Care (0606).

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Article XIV of the Missouri Constitution and associated rules 19 CSR 30-95.010 to 19 CSR 30-95.110.

6. Are there federal matching requirements? If yes, please explain.

No.

7. Is this a federally mandated program? If yes, please explain.

No.

NEW DECISION ITEM

RANK: 7

Department of	f Health and Ser	nior Services	3		Budget Unit	58860C			
Division of Re	gulation and Lic	censure							
Medical Mariji	uana		[) # 1580007	HB Section	10.900			
1. AMOUNT C	OF REQUEST								
		2022 Budget	Request			FY 2022	2 Governor's	Recommend	lation
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	243,300	243,300	EE	0	0	0	0
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	0	0	243,300	243,300	Total	0	0	0	0
-					•				
FTE	0.00	0.00	5.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	70,240	70,240	Est. Fringe	0	0	0	0
	budgeted in Hou	-			Note: Fringes	-	-	•	•
_	ctly to MoDOT, Hi		•	-	budgeted direc	-		•	-
-	Missouri Veterans	-			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,	· , · · · · · · · · · · · · ·		
2 THIS REOU	EST CAN BE CA	TEGORIZED) AS:						
	ew Legislation		710.	Х	New Program		F	Fund Switch	
	ederal Mandate		-		Program Expansion	-		Cost to Contin	ue
	R Pick-Up		-		Space Request	-		Equipment Re	
	ay Plan		_		Other:	_		, ,,,,,,,,,,,,,,,	

3. WHY IS THIS FUNDING NEEDED? PROVIDE AN EXPLANATION FOR ITEMS CHECKED IN #2. INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

The Medical Marijuana Regulatory Program first full fiscal year of operations was FY 2020, in which the program experienced a faster patient adoption rate than estimated. This is expected to increase again as product becomes available. The program is also experiencing higher than anticipated volume of applications from licensed facilities to make changes to their facilities and has no staffing allocated for regular inspections of patient cultivation sites. These developments are associated with continued implementation of a new constitutional amendment. In addition, new legislation was passed during they FY 2020 legislative cycle (Section 195.805 and 195.815, RSMo), which contains provisions requiring the program to accept pre-approval applications for THC-infused edible products and packaging as well as to review patient certifications generated through telemedicine. Based on similar laws in other states and the program's experience in its first year of operation combined, it is estimated the workload increase associated with these needs will be one FTE (2,080 hours) is to inspect eight home cultivation sites per week; two FTE (4,160 hours) to process 560 applications for THC-infused edible products.

NEW DECISION ITEM

RANK:	7	OF	14

Department of Health and Senior Services		Budget Unit 58860C
Division of Regulation and Licensure		
Medical Marijuana	DI# 1580007	HB Section 10.900

4. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why. Detail which portions of the request are one-times and how those amounts were calculated.)

The 5.0 FTE will complete the following duties:

- 1.0 FTE Regulatory Compliance Inspector will assist with annual inspections of patient cultivations as regular compliance activity and per law enforcement referrals or public complaints.
- 2.0 FTE Public Health Program Associate will review and process patient applications related to increased adoption rate and expansion of telemedicine pursuant to legislation enacted and review and process facility complaints, variance requests, and change applications.
- 2.0 FTE Senior Regulatory Auditors will review and approve applications for THC-infused edibles pursuant to legislation enacted during 2020.

5. BREAK DOWN THE REQUEST BY BU	JDGET OBJEC	CT CLASS, J	OB CLASS, A	AND FUND SO	OURCE. IDE	NTIFY ONE-	TIME COSTS		
	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req	Dept Req
	GR	GR	FED	FED	OTHER	OTHER	TOTAL	TOTAL	One-Time
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS
Compliance Inspector (21II30)	0	0.0	0	0.0	0	1.0	0	0.0	0
Public Health Program Assoc (19PH10)	0	0.0	0	0.0	0	2.0	0	0.0	0
Senior Regulatory Auditor (21RB50)	0	0.0	0	0.0	0	2.0	0	0.0	0
Total PS	0	0.0	0	0.0	0	5.0	0	0.0	0
Computer equipment (480)	0		0		243,300		243,300		96,000
Total EE	0		0		243,300		243,300		96,000
Grand Total	0	0.0	0	0.0	243,300	5.0	243,300	0.0	96,000
									· <u> </u>

NEW DECISION ITEM

INCAY DI	EGIGIGIA II EM
RANK:	OF 14
Department of Health and Senior Services	Budget Unit 58860C
Division of Regulation and Licensure	
Medical Marijuana DI# 1580007	HB Section 10.900
6. PERFORMANCE MEASURES (If new decision item has an associated funding.)	d core, separately identify projected performance with & without additional
6a. Provide an activity measure(s) for the program.	6b. Provide a measure(s) of the program's quality.
The department will report the number of infused-edible applications processed; number of facility change applications processed; number of facility complaint investigations completed.	The department already conducts customer satisfaction surveys to evaluate its licensing process, and it will add the infused edible preapproval process to the existing survey.
6c. Provide a measure(s) of the program's impact.	6d. Provide a measure(s) of the program's efficiency.
The department will report the number of patient cultivation inspections completed and physician certification violations investigated with	The department will report the average number of days to process infused-edible applications.
7. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TA	RGETS:
The Department will implement actions consistent with the timeframes establi 195.815, RSMo.	ished in Article XIV, Section 1, associated rules, and Sections 191.1146, 195.805, and

DECISION ITEM DETAIL

SECURED

SECURED

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00.0	0	00.0	00£,74r	00.0	0	00.0	0	33 - JATOT
00.0	0	00.0	147,300	00.0	0	00.0	0	СОМРИТЕЯ ЕДИІРМЕИТ
00.0	0	6.00	0	00.0	0	00.0	0	29 - JATOT
00.0	0	2.00	0	00.0	0	00.0	0	SENIOR REGULATORY AUDITOR
00.0	0	1.00	0	00.0	0	00.0	0	COMPLIANCE INSPECTOR
00.0	0	2.00	0	00.0	0	00.0	0	PUBLIC HEALTH PROGRAM ASSOC
								Medical Marijuana - 1580007
								MEDICAL MARIJUANA
СОГЛШИ	СОГЛШИ	ЭТЯ	DOLLAR	ЭТЯ	DOLLAR	ЭТЯ	DOLLAR	Budget Object Class

BUDGET

FY 2021

AUTDA

EX 2020

AUTDA

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EX 2022

BUDGET

FY 2021

DEPT REQ

EX 2022

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Decision Item

Budget Unit

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58870C
Regulation and Licensure		
Core - DHSS Vets Commission Transfer	HB Section	10.910

1. CORE FINANCIAL SUMMARY

		FY 2022 Budg	et Request			FY 202	2 Governor's	Recommendat	ion
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	0	0	0	0	PSD	0	0	0	0
TRF	0	0	2,135,510	2,135,510	TRF	0	0	0	0
Total	0	0	2,135,510	2,135,510	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes bu	udgeted in House	Bill 5 except for	r certain fringes	budgeted	Note: Fringes bu	idgeted in Hous	se Bill 5 except	for certain fring	es budgeted
directly to MoDO	T, Highway Patro	ol, and Conserva	ation.		directly to MoDO	T, Highway Pat	rol, and Conse	rvation.	

Other Funds: Veterans Health and Care (0606).

2. CORE DESCRIPTION

The Section for Medical Marijuana Regulation enhances access to care for Missourians with qualifying conditions by accepting and processing patient and caregiver applications and annual renewals for Medical Marijuana Identification cards. In addition, the Section also accepts, processes, and awards facility licenses and certifications and conducts compliance inspections of licensed and certified facilities in order to enhance Missourian's access to care as authorized under Article XIV of the Missouri Constitution and associated rules 19 CSR 30-95.010 to 19 CSR 30-95.110. All funds received from application fees are deposited into the Veteran Health and Care Fund. After the Section's administrative expenses are paid, the remainder of monies in the fund are transferred to The Veteran's Commission by way of this transfer.

PROGRAM LISTING (list programs included in this core funding)

Section for Medical Marijuana Regulation

CORE DECISION ITEM

Health and Senior Services

Regulation and Licensure

Core - DHSS Vets Commission Transfer

Budget Unit 58870C

HB Section 10.910

4. FINANCIAL HISTORY

-	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.	7,500,000	Actual Expenditures (A	II Funds)
Appropriation (All Funds)	0	0	0	2,135,510	6,500,000		
_ess Reverted (All Funds)	0	0	0	0	3,000,000		
_ess Restricted (All Funds)	0	0	0	0	5,500,000		
Budget Authority (All Funds)	0	0	0	2,135,510	3,300,000		
Actual Expenditures (All Funds)	0	0	0	N/A	4,500,000		
Jnexpended (All Funds)	0	0	0	N/A			
• • • • • • • • • • • • • • • • • • • •					3,500,000		
Jnexpended, by Fund:					0.500.000		
General Revenue	0	0	0	N/A	2,500,000		
Federal	0	0	0	N/A			
Other	0	0	0	N/A	1,500,000		
					500,000	1	
						FY 2019	FY 2020

Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES: The DHSS Vets Commission Transfer was established in FY 2021.

CORE RECONCILIATION DETAIL

DHSS VETS COMMISSION TRANSFER

	Total	00.0	0	0	2,135,510	2,135,510	Ī
		00.0	0	0	2,135,510	2,135,510	\overline{i}
GOVERNOR'S RECOMMENDED C	ORE						
	Total	00.0	0	0	2,135,510	2,135,510	Ī
	TRF	00.0	0	0	2,135,510	2,135,510	\overline{i}
DEPARTMENT CORE REQUEST							
	IstoT	00.0	0	0	2,135,510	2,135,510	= 1
	TRF	00.0	0	0	2,135,510	2,135,510	\overline{i}
TAFP AFTER VETOES							
	Budget Class	ЭТЭ	ВЭ	Federal	Other	3 lstoT	Explanation
5. CORE RECONCILIATION DETA	ור						

DECISION ITEM SUMMARY

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132,13610

2,135,510

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ATOT - JATOT	0	00.0	2,135,510	00.0	2,135,510	00.0	0	00.0
FUND TRANSFERS VET HEALTH AND CARE FUND	0	00.0	2,135,510	00.0	2,135,510	00.0	0	00.0
СОВЕ								
DHSS VETS COMMISSION TRANSFER								
Fund	DOLLAR	3T7	DOLLAR	3T7	DOLLAR	3T7	СОГЛШИ	СОГЛШИ
Budget Object Summary	AUTOA	AUTOA	BUDGET	BUDGET	рерт кед	рерт кед	SECURED	SECNBED
Budget Unit Decision Item	FY 2020	FY 2020	FY 2021	FY 2021	FY 2022	FY 2022	********	*******

132,13610

2,135,510

0\$

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DECISION ITEM DETAIL

OENERAL REVE UT JARAGET UT REDERLU UT RENERLU	0\$ 0\$	00.0 00.0 00.0	\$5,135,510 \$0	00.0 00.0 00.0	\$5,135,510 \$0	00.0 00.0 00.0		00.0 00.0 00.0
GENERAL BEVE	0\$	00.0	0\$	00.0	0\$	000		00.0
DATOT GNARÐ	0\$	00.0	\$5,135,510	00.0	\$5°132°210	00.0	0\$	00.0
FIRE - JATOT	0	00.0	2,135,510	00.0	2,135,510	00.0	0	00.0
TUO SABARANT	0	00.0	2,135,510	00.0	2,135,510	00.0	0	00.0
СОВЕ								
DHSS VETS COMMISSION TRANSFER								
Budget Object Class	DOLLAR	3T7	DOLLAR	ЭТЭ	DOLLAR	3T7	СОГЛШИ	СОГЛШИ
Decision Item	AUTOA	AUTDA	BUDGET	BUDGET	рерт кед	DEPT REQ	SECURED	SECURED
Budget Unit	EA 2020	FY 2020	FY 2021	FY 2021	FY 2022	FY 2022	******	******

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DHSS Legal Expense Transfer

CORE DECISION ITEM

Health and Senior Services	Budget Unit	58011C
Division of Administration		
Core - DHSS Legal Expense Fund Transfer	HB Section	10.955

1. CORE FINANCIAL SUMMARY

		FY 2022 Budge	et Request			FY 2022	! Governor's I	Recommendati	on
	GR	Federal	Other	Total		GR	Fed	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	0	0	0	0	PSD	0	0	0	0
TRF	1	0	0	1	TRF	0	0	0	0
Total	1	0	0	1	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
Note: Fringes bu	dgeted in House	Bill 5 except for	certain fringes l	budgeted	Note: Fringes	budgeted in Hous	e Bill 5 except	for certain fring	es
directly to MoDO	T, Highway Patro	I, and Conserva	tion.		budgeted direc	tly to MoDOT, Hig	ihway Patrol, a	and Conservatio	n.

2. CORE DESCRIPTION

The General Assembly appropriated one dollar for transfers from the department's core budget to the State Legal Expense Fund for the payment of claims, premiums, and expenses provided by Section 105.711 through Section 105.726, RSMo. In order to fund such expenses, the General Assembly also authorized three percent flexibility from the Department's operating budget into the one dollar transfer appropriation.

3. PROGRAM LISTING (list programs included in this core funding)

DHSS Director's Office

CORE DECISION ITEM

Health and Senior Services

Division of Administration

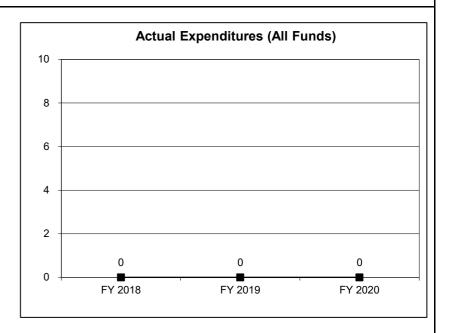
Core - DHSS Legal Expense Fund Transfer

Budget Unit 58011C

HB Section 10.955

4. FINANCIAL HISTORY

_	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Current Yr.
Appropriation (All Funds)	1	1	1	1
Less Reverted (All Funds)	0	0	0	0
Less Restricted (All Funds)	0	0	0	0
Budget Authority (All Funds)	1	1	1	1
Actual Expenditures (All Funds)	0	0	0	N/A
Unexpended (All Funds)	1	1	1	N/A
Unexpended, by Fund:				
General Revenue	1	1	1	N/A
Federal	0	0	0	N/A
Other	0	0	0	N/A



Reverted includes the Governor's standard three percent reserve (when applicable).

Restricted includes any Governor's expenditure restrictions which remained at the end of the fiscal year (when applicable).

NOTES:

CORE RECONCILIATION DETAIL

DHSS LEGAL EXPENSE FUND TRF

5. CORE RECONCILIATION DETAIL

						ORE	СОЛЕВИОВ'Я ВЕСОММЕИDED
Ī		0	0	ı	00.0	IstoT	
ī		0	0	l	00.0	TRF	
							ТЕРРАТМЕИТ СО ВЕ РЕДИЕЗТ
Ī		0	0	ı	00.0	Total	
ī		0	0	l	00.0	TRF	
							TAFP AFTER VETOES
Explanation	IstoT	Other	Federal	ЯЭ	3T3	Budget Class	

00.0

00.0

Total

TRF

DECISION ITEM SUMMARY

CLINID TOANISTEDS								
СОВЕ								
DHSS LEGAL EXPENSE FUND TRF								
pun	ВОГГАК	3T7	DOLLAR	3T4	DOLLAR	3T7	СОГЛШИ	СОГЛШИ
Budget Object Summary	AUTDA	ACTUAL	BUDGET	BUDGET	рерт кед	DEPT REQ	SECURED	SECURED
Decision Item	FY 2020	FY 2020	FY 2021	FY 2021	FY 2022	FY 2022	*****	*****
Budget Unit								

GRAND TOTAL	0\$	00.0	1\$	00.0	l\$	00.0	0\$	00.0
J A TOT	0	00.0	ı	00.0	ı	00.0	0	00.0
TRF - JATOT	0	00.0	<u>,</u>	00.0	<u> </u>	00.0	0	00.0
GENERAL REVENUE FUND TRANSFERS	0	00.0	l I	00.0	l l	00.0	0	00.0

DECISION ITEM DETAIL

00.0	0\$	00.0	l \$	00.0	l \$	00.0	0\$	JATOT GNAS
00.0	0	00.0	ı	00.0	ı	00.0	0	FIRE - JATOT
00.0	0	00.0	l	00.0	ı	00.0	0	TUO SABARANAT
								СОКЕ
								DHSS LEGAL EXPENSE FUND TRF
СОГЛШИ	СОГЛШИ	3T4	DOLLAR	3T7	DOLLAR	ЭТЯ	DOLLAR	Budget Object Class
SECURED	SECURED	рерт кед	DEPT REQ	BUDGET	BUDGET	AUTDA	AUTOA	Decision Item
*******	*****	E 人 5055	FY 2022	FY 2021	FY 2021	EA 2020	FY 2020	Budget Unit

	GENERAL REVENUE FEDERAL FUNDS OTHER FUNDS	0\$ 0\$ 0\$	00.0 00.0 00.0	0\$ 0\$ 1\$	00.0 00.0 00.0	0\$ 0\$ \$	00.0 00.0 00.0		00.0 00.0 00.0
JATOT GNAR		0\$	00.0	l\$	00.0	l\$	00.0	0\$	00.0
ТОТА Т - ТЯЕ		0	00.0	ı	00.0	ı	0.00	0	00.0
CORE TRANSFERS OUT		0	00.0	l l	00.0	l l	00.0	0	00.0

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FY 2021Supplemental Requests

Department o	f Health and Se	nior Services					House	Bill Section	10.620
Division of Ac	dministration							_	
Missouri Cord	oners Training F	und Refund	D	I# 2580001	Original F	Y 2021 Hous	se Bill Section,	if applicable _	
1. AMOUNT (OF REQUEST								
	FY 2021 Supp	lemental Budg	et Request		FY 2021	Supplemen	tal Governor's	Recommendat	ion
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	0	0	0	PS	0	0	0	0
EE	0	0	0	0	EE	0	0	0	0
PSD	0	0	1,200	1,200	PSD	0	0	0	0
TRF	0	0	0	0	TRF	0	0	0	0
Total	0	0	1,200	1,200	Total	0	0	0	0
FTE	0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
POSITIONS	0	0	0	0	POSITIONS	0	0	0	0
NUMBER OF	MONTHS POSIT	IONS ARE NE	EDED:		NUMBER OF MC	NTHS POSIT	TIONS ARE NE	EDED:	
Est. Fringe	0	0	0	0	Est. Fringe	0	0	0	0
_	budgeted in Hou OOT, Highway Pa		_	es budgeted	Note: Fringes but directly to MoDO				es budgeted

Other Funds: Missouri Coroners Training (0846).

2. WHY IS THIS SUPPLEMENTAL FUNDING NEEDED? INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR

The Coroner's Training Fund, established in House Bill 2046, was passed during the FY 2020 Regular Session. This fund receives monies through a statutorily required one dollar fee collected for each certified copy of a death certificate issued in Missouri. This fund provides training to coroners through the Missouri Coroners' and Medical Examiners' Association. The Department of Health and Senior Services (DHSS) must be able to refund monies to citizens and other organizations when necessary. Refund appropriations provide DHSS with a mechanism to process refunds in a timely manner.

3. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why.

The requested refund appropriation amount is based on spending in prior years from a similar fund's refund appropriation.

Department of Health and Senior Services						Hous	e Bill Section	10.620
Division of Administration							_	
Missouri Coroners Training Fund Refund		DI# 2580001		Origina	I FY 2021 Hous	se Bill Section	, if applicable _	
4. BREAK DOWN THE REQUEST BY BUDG	GET OBJECT (CLASS, JOB C	LASS, AND FU	IND SOURCE.				
	Dept Req GR	Dept Req GR	Dept Req FED	Dept Req FED	Dept Req OTHER	Dept Req OTHER	Dept Req TOTAL	Dept Req TOTAL
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE
Refunds (780)	0		0		1,200		1,200	
Total PSD	0	-	0	-	1,200	-	1,200	
Grand Total	0	0.0	0	0.0	1,200	0.0	1,200	0.0
5. PERFORMANCE MEASURES (If new dec		s an associate						nal funding.
5a. Provide an activity measure of the prog	ıram.			5b. Provide a	measure of the	e program's qu	uality.	
Not applicable.				Not applica	ble.			
5c. Provide a measure of the program's im	pact.			5d. Provide a	measure of the	e program's ef	ficiency.	
Not applicable.				Not applica	ıble.			
6. STRATEGIES TO ACHIEVE THE PERFO	RMANCE MEA	SUREMENT T	ARGETS:					
Not applicable.								

State Dublic Health		or Services					House	Bill Section	
State Public Healtr	ո Laboratory							_	
Food Testing and	Capacity		D	I# 2580002	Original F	Y 2021 House	e Bill Section,	if applicable	
1. AMOUNT OF RE	EQUEST								
		emental Budge	et Request		FY 2021	Supplement	al Governor's	Recommendat	ion
	GR	Federal	Other	Total		GR	Federal	Other	Total
PS	0	158,187	0	158,187	PS	0	0	0	0
EE	0	596,512	0	596,512	EE	0	0	0	0
PSD	0	0	0	0	PSD	0	0	0	0
ΓRF	0	0	0	0	TRF	0	0	0	0
Γotal	0	754,699	0	754,699	Total	0	0	0	0
TE.	0.00	4.00	0.00	4.00	FTE	0.00	0.00	0.00	0.0
POSITIONS	0	0	0	0	POSITIONS	0	0	0	
NUMBER OF MON	THS POSITION	ONS ARE NEED	DED:	12	NUMBER OF MO	NTHS POSIT	IONS ARE NEE	DED:	
Est. Fringe	0	108,457	0	108,457	Est. Fringe	0	0	0	0

2. WHY IS THIS SUPPLEMENTAL FUNDING NEEDED? INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

The Missouri Department of Health and Senior Services (DHSS) State Public Health Laboratory (SPHL) has applied for FDA cooperative agreement funding to increase capability and capacity in food testing areas where FDA has identified specific needs. The goals and outcomes of this cooperative agreement include the following:

- 1. SPHL, in support of Missouri's manufactured food regulatory programs (MFRPS), will conduct testing of targeted food samples using validated test methods and a quality management system.
- 2. The test results generated by SPHL will be shared with Missouri's MFRPS program and FDA partners.
- 3. SPHL will participate in small scale method development, method validation research, and matrix extensions as requested by FDA.

The expected outcome from the completion of the aims will be to protect the safety of the food supply and further increase public health. This project will strengthen and improve the collaboration of surveillance testing activities between the FDA, Missouri MFRPS, and SPHL. Thus, advancing a national integrated food safety

Department of Health and Senior Services		House Bill Section
State Public Health Laboratory	_	
Food Testing and Capacity	DI# 2580002	Original FY 2021 House Bill Section, if applicable

3. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why.

SPHL developed a grant budget from the guidance and activities required in the grant application. The additional testing and workload were estimated in order to determine the number of additional FTE and Expenses and Equipment needed. The nature of this work does not allow outsourcing.

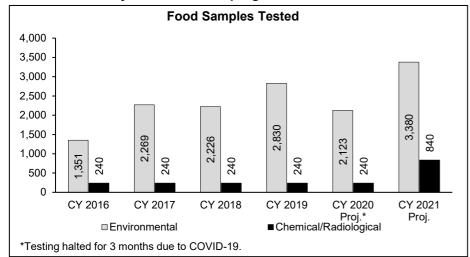
4. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE.

Budget Object Class/Job Class	Dept Req GR DOLLARS	Dept Req GR FTE	Dept Req FED DOLLARS	Dept Req FED FTE	Dept Req OTHER DOLLARS	Dept Req OTHER FTE	Dept Req TOTAL DOLLARS	Dept Req TOTAL FTE
Budget Object Class/30b Class	DOLLANS	1112	DOLLARS	116	DOLLARS	1112	DOLLARS	116
Laboratory Scientist (19LB50)	0	0.0	127,938	3.0	0	0.0	127,938	3.0
Laboratory Support Assistant (19LB10)	0	0.0	30,249	1.0	0	0.0	30,249	1.0
Total PS	0	0.0	158,187	4.0	0	0.0	158,187	4.0
Out-of-state Travel (160)	0		32,561		0		32,561	
Supplies (190)	0		152,381		0		152,381	
Professional Development (320)	0		75,949		0		75,949	
Maintenance & Repairs (430)	0		87,041		0		87,041	
Equipment (590)	0		248,580		0		248,580	
Total EE	0	•	596,512	-	0	-	596,512	
Grand Total	0	0.0	754,699	4.0	0	0.0	754,699	4.0

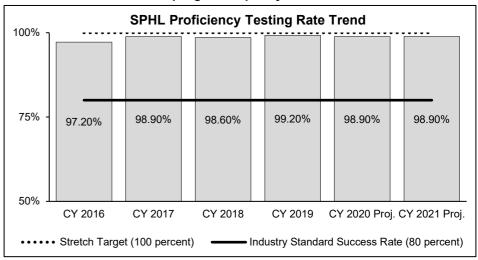
Department of Health and Senior Services		House Bill Section	
State Public Health Laboratory			
Food Testing and Capacity	DI# 2580002	Original FY 2021 House Bill Section, if applicable _	
		-	

5. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)

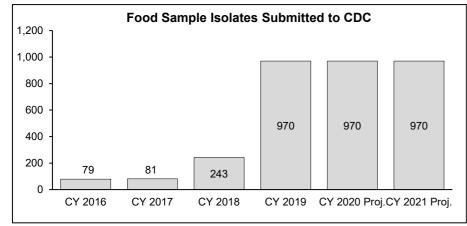
5a. Provide an activity measure of the program.



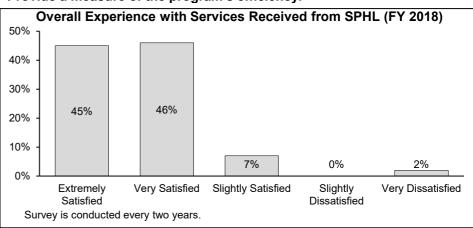
5b. Provide a measure of the program's quality.



5c. Provide a measure of the program's impact.



5d. Provide a measure of the program's efficiency.



Department of Health and Senior Services		House Bill Section
State Public Health Laboratory		
Food Testing and Capacity	DI# 2580002	Original FY 2021 House Bill Section, if applicable
6. STRATEGIES TO ACHIEVE THE PERFORMAN	CE MEASUREMENT TARGETS:	
1. By June 30, 2021, increase the number of scie 2. By June 30, 2021, acquire equipment funded in		

	nior Services			Ho	ouse Bill Sect	tions 1	0.810 & 10.815	
		ices [DI# 2580003	Original F	Y 2021 Hous	e Bill Section	if annlicable	
e and commu	my Basea Gerv	1003	2000000	Originari	1 2021 11003	e Bill Occilon,	п аррпсавіс	
F REQUEST								
FY 2021 Supp	lemental Budg	et Request		FY 2021	Supplement	tal Governor's	Recommendat	ion
GR	Federal	Other	Total		GR	Federal	Other	Total
0	0	0	0	PS	0	0	0	0
0	0	0	0	EE	0	0	0	0
6,325,293	11,596,214	0	17,921,507	PSD	0	0	0	0
0	0	0	0	TRF	0	0	0	0
6,325,293	11,596,214	0	17,921,507	Total	0	0	0	0
0.00	0.00	0.00	0.00	FTE	0.00	0.00	0.00	0.00
0	0	0	0	POSITIONS	0	0	0	0
ONTHS POSIT	TIONS ARE NEE	DED:		NUMBER OF MC	NTHS POSIT	TIONS ARE NEE	EDED:	
0	0	0	0	Est. Fringe	0	0	0	0
-	•		ges budgeted	_	-	•		es budgeted
- T	F REQUEST FY 2021 Suppose GR 0 6,325,293 0 6,325,293 0.00 0 IONTHS POSIT	F REQUEST FY 2021 Supplemental Budg GR Federal 0 0 0 6,325,293 11,596,214 0 0 6,325,293 11,596,214 0 0 0 10NTHS POSITIONS ARE NEE	F REQUEST FY 2021 Supplemental Budget Request GR Federal Other 0 0 0 0 0 0 0 6,325,293 11,596,214 0 0 0 0 6,325,293 11,596,214 0	### And Community Based Services DI# 2580003 FREQUEST	FREQUEST	Part Part	Part Part	Part Part

2. WHY IS THIS SUPPLEMENTAL FUNDING NEEDED? INCLUDE THE FEDERAL OR STATE STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS PROGRAM.

Maintaining the current authorized Home and Community Based Services (HCBS) care plans require supplemental funding to provide Medicaid participants with long-term care in their homes and communities. HCBS include: Medicaid State Plan Personal Care, Independent Living Waiver, Adult Day Care Waiver, and the Aged and Disabled Waiver administered by the Division of Senior and Disability Services; the AIDS Waiver; Medically Fragile Adult Waiver; and Healthy Children and Youth Program administered by the Division of Community and Public Health. Funding will cover anticipated costs of increased utilization, increased units of authorized service per client, and increased number of eligible individuals utilizing the program. This request is not associated with expansion of the program or eligibility requirements. The federal authority for this program is the Social Security Act Sections 1894, 1905(a)(7), 1905(a)(24), 1915(c), and 1934; 42 CFR 440.130, 440.170(f), 440.180, 440.210 and 460. The state authority for this program is Sections 208.152, 208.168, and 192.2000.1, RSMo.

Department of Health and Senior Services		House Bill Sections 10.810 & 10.815
Division of Senior and Disability Services		
Medicaid Home and Community Based Services	DI# 2580003	Original FY 2021 House Bill Section, if applicable

3. DESCRIBE THE DETAILED ASSUMPTIONS USED TO DERIVE THE SPECIFIC REQUESTED AMOUNT. (How did you determine that the requested number of FTE were appropriate? From what source or standard did you derive the requested levels of funding? Were alternatives such as outsourcing or automation considered? If based on new legislation, does request tie to TAFP fiscal note? If not, explain why.

	State	Federal	Total	State	Federal	Total	Net
	10.815 HCBS In-Home						
FY2021 Available Core	146,854,139	274,109,917	420,964,056	178,005,684	332,741,685	510,747,369	931,711,425
FY2021 Projected Services	(146,854,139)	(274,109,917)	(420,964,056)	(184,330,977)	(344,337,899)	(528,668,876)	(949,632,932)
FY2021 Shortfall	0	0	0	(6,325,293)	(11,596,214)	(17,921,507)	(17,921,507)

4. BREAK DOWN THE REQUEST BY BUDGET OBJECT CLASS, JOB CLASS, AND FUND SOURCE.

	Dept Req GR	Dept Req GR	Dept Req FED	Dept Req FED	Dept Req OTHER	Dept Req OTHER	Dept Req TOTAL	Dept Req TOTAL
Budget Object Class/Job Class	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE	DOLLARS	FTE
Program Distributions (800)	6,325,293		11,596,214				17,921,507	
Total PSD	6,325,293		11,596,214		0		17,921,507	
Grand Total	6,325,293	0.0	11,596,214	0.0	0	0.0	17,921,507	0.0

5. PERFORMANCE MEASURES (If new decision item has an associated core, separately identify projected performance with & without additional funding.)

5a. Provide an activity measure of the program.

Since this decision item is a request for the increase in authority of an existing program, the measures are incorporated in the individual program descriptions.

5c. Provide a measure of the program's impact.

Since this decision item is a request for the increase in authority of an existing program, the measures are incorporated in the individual program descriptions.

5b. Provide a measure of the program's quality.

Since this decision item is a request for the increase in authority of an existing program, the measures are incorporated in the individual program descriptions.

5d. Provide a measure of the program's efficiency.

Since this decision item is a request for the increase in authority of an existing program, the measures are incorporated in the individual program descriptions.

6. STRATEGIES TO ACHIEVE THE PERFORMANCE MEASUREMENT TARGETS:

Not applicable.